

Project ID: MOHW106-CDC-C-114-000705

Department of Disease Control, Ministry of Health and Welfare 106 Commissioned Technology Research Project

防疫合作契機與策略評估  
Anti-epidemic cooperation opportunities and strategy evaluation

Strategies and Evaluations for the Opportunities on International  
Cooperation of Diseases Prevention and Control

Annual/full research report

Executive agency: School of Public Health, Taipei Medical University

Project host: Guo Naiwen

Co-hosts: Chen Zaijin, Qiu Yawen, Zhuang Xiuwen, Cai Fengzhen

Researchers: Zhou Zheyong, Chen Qinmou, Xu Chunjia

During execution: 106 year 1 month 1 Day to 106 year 12 month 31 day

Research funding: New Taiwan Dollar 1,080 Ten thousand yuan

\* This research report is for reference only, and does not represent the opinion of the Department. If the research results are released by the media, please

Ask for our agreement\*

## Chinese Abstract

Taipei Medical University has been internationalized rapidly in the past ten years, not only with the global (including Southeast Asia) 180 University (machine To form alliances and actively participate in international health cooperation. There are two permanent bases in overseas Chinese friendly countries-Swaziland permanent medical corps and the Health Center of the Republic of the Marshall Islands; in this plan, the Participation is very helpful to increase our country's energy in international health and security; the results of this project are summarized below.

### 1. Beijing Medical Team GHSA versus JEE Related topics, analysis and evaluation of my country's relations with the United States, Southeast Asian countries or diplomatic countries

The epidemic prevention cooperation strategy developed by domestic cooperation; through visits to the United States, Thailand, Vietnam, Indonesia, Malaysia and other countries

For our country GHSA Affairs participation and the establishment of an international epidemic prevention cooperation network have the following benefits:

(1) With America GHSA Think tank important town or NGO ,Such as: Johns Hopkins School of Public Health Center

for Health Security, George Washington University , NextGen Wait for a close relationship,

especially NextGen Not in our country GHSA In the case of member states, assisting our country to send personnel to participate 10 month

2527 The 4th held in Uganda GHSA High-level ministerial meetings have valuable contributions;

(2) In Thailand, with the deputy director of the country's disease control agency Dr. Tanarak Plipat Build a good relationship, Dr. Plipat

Also visited Taiwan twice, Thailand is the United States CDC It is an important hub for epidemic prevention contact and command in Asia, and it is also AMR Collar

Guide the country, worthy of exchange;

(3) In Vietnam, through two visits to the Quang Ninh Provincial Department of Health and the Director General of the Quang Ninh Department of Health

The Department of Health and Thoracic Hospital has established a good interaction. The Quang Ninh Provincial Department of Health TB And dengue fever prevention

There is a deep interest in the results, and it will be the new southward policy of the Chinese Disease Control Agency in the future. TB And dengue fever prevention

Lay the foundation for the cooperation of the deep cultivation center;

(4) On the Indonesian side, it has established good interactions with Indonesia's Yogyakarta Special Administrative Region and the Central Java Province Health Department

In our country TB And the effectiveness of dengue fever prevention and control, which is a new south direction for my country's Disease Control Agency.

Policy TB Lay the foundation for the cooperation with the Dengue Fever Prevention and Transformation Deep Cultivation Center.

### 2. Through JEE Sharing and building a platform for future key epidemic prevention cooperation and training with the new Southbound countries, preparing for the future and the new

The state conducts key epidemic prevention cooperation. Through related invitations and visits, we will establish a new southward relationship with Thailand, Indonesia, Viet

The central or local epidemic prevention authorities of key countries establish communication channels:

(1) Deputy Director of the Thai Disease Control Agency Dr. Tanarak Plipat Two visits to Taiwan, with my country's Disease Control Agency and Taipei Medical

To establish good relationships with universities, Dr. Tanarak Plipat Expressed willingness to assist my country's epidemic prevention

cooperation within the scope of possible;

(2) Director of the Department of Disease Control, Ministry of Health, Singapore Dr. Vernon Lee After the visit, I also expressed my willingness to cooperate with our country

Technical exchanges on the prevention and control of leather fever and other diseases;

(3) Director of the Department of Health of Quang Ninh Province, Vietnam, and others MoU and TB , Dengue Fever Control

Express strong interest in cooperation and exchange of experience;

(4) Director of Disease Control, Department of Health, Central Java Province, Indonesia Dr. Sigit Armunant Also on TB Dengue

The cooperation and exchange of experience in thermal control express a high degree of willingness.

3. Continue to collect information on the international community of the United States and other Southeast Asian participating countries GHSA with JEE Evaluate development trend

And information on the national public health's preparation and epidemic prevention capabilities; the information collected by this team is compiled into a book every month to

Control Department (please see attached volume for details).

4. According to our country 105 Years accepted UPMC JEE The evaluation results of the evaluation report are in need of improvement and attention in my country

Point( ~~Zoonotic diseases~~ 人畜共通疾病 ) , ~~Antibiotic resistance~~ 抗生素抗藥性 ) , ~~Biosafety and Biosecurity~~ ( Biosafety and ~~biosecurity~~ 生物安全與生物保安 ) communication platform for relevant epidemic prevention cooperation topics;

Held three cross-field industry, government, academic and research domestic experts strategic planning consultation meetings and three domestic and foreign experts round

Consultation meetings, and based on the aforementioned evaluation and survey results, develop and establish a road map of cooperation strategies for each of the three the

5. Participated with the US GHSA Initiative or JEE The assessed health unit or non-governmental organization ( NGO ) Cooperation with the

theme of "International Cooperation on Health and Safety" 106 year 11 month 8 International forums will be held in my country on Japan,

inviting domestic and foreign experts, organizations and stakeholders (total 6 Countries 8 Scholars and experts), and published the

aforementioned research results at the 在需求書規格之外，本團隊亦於 月 日於泰國清邁舉行之

第九屆 會議辦理會前工作坊，分享我國 之經驗，提升我國

國際能见度

6. Organize the above evaluation survey, talent cultivation, strategic planning and forum results into a strategic report.

關鍵詞：衛生安全，全球衛生安全議程，國際衛生條例，聯合外部評估，國際合作

## Abstract

Taipei Medical University (TMU) has quickly become an internationally recognized university in the last decade. By forming alliances with 180 universities around the world (especially in Southeast Asia) and setting up offices in allied countries (2 long-term medical missions in Swaziland and Marshall Islands, respectively), TMU has shown that it is strongly committed to forming global health collaborations. The aim of this course of action is to enhance Taiwan's role and capacity in the global health security arena through international collaborations. Major achievements of this study are listed below:

1. In accordance with the GHSA and JEE, TMU team has analyzed and evaluated possible collaboration strategies on infectious diseases control between Taiwan and the United States, Southeast Asian countries, and countries with diplomatic relations. Through visiting activities to the United States, Thailand, Vietnam, Indonesia, and Malaysia, the benefits for Taiwan to participate GHSA affairs and for international collaborations on disease prevention and control are as follows.

(1) The TMU team has built up strong and close connection with important US think tanks and NGO, such as Johns Hopkins School of Public Health Center for Health Security, George Washington University, and Next Generation (NextGen). For example, although Taiwan is not a member of GHSA, however, with the assistance from NexGen, Taiwan was able to send two delegates to attend the 4<sup>th</sup> GHSA High Level Ministerial Meeting held in Uganda from Oct. 25 to 27.

(2) In terms of Thailand, the research team has built up good relationship with Dr. Tanarak Plipat, the Deputy Director-General of Thai CDC. Dr. Plipat has been invited to Taipei twice in the past 6 months. Thailand is the base of the US CDC Asian Commander and also a leading country on AMR (Antimicrobial Resistance). Therefore, Thailand is an important country for future collaboration.

(3) Regarding Vietnam, the TMU team had visited the Quang Ninh Province Department of Health twice. The Director of the Provincial Department of Health, Dr. Vu, has shown strong interests in signing an MoU with Taiwan CDC and develop collaborations on TB and Dengue Fever control.

(4) As to Indonesia, the TMU team has visited the Yogyakarta (a provincial level special region) and Central Java Province and built up network for future collaborations. The Indonesian local health authorities have expressed strong intention for collaboration on TB and Dengue Fever control.



2. Through invited guests and the JEE experience sharing with the Southeastern Asian countries, the TMU team has assisted the Taiwan CDC in building up a network and platform for future training and collaboration on diseases prevention and control, such as TB and Dengue Fever at the central and local government levels as listed below.
  - (1) Thailand—Dr. Plipat, the Deputy Director-General of Thai CDC has expressed his willingness to share Thailand's experience to the extent possible.
  - (2) Singapore—Dr. Vernon Lee, Director of Communicable Diseases, Singapore Ministry of Health, also expressed his interests in exchanging experience in Zika and Dengue prevention.
  - (3) Vietnam and Indonesia local health authorities were also have been invited.
3. The TMU team has collected information regarding developments of the GHSA and JEE, including public health preparedness and core capacity building for infectious diseases control from the United States and Southeast Asian countries monthly and submitted to the Taiwan CDC. Please see the supplement for details.
4. The research team has built up communicating platform for infectious disease control based on the JEE evaluation report provided by UPMC in 2016, especially on the weakness suggested by the report, namely, (1) Zoonotic Disease, (2) Antimicrobial Resistance and (3) Biosafety and Biosecurity. The TMU team has hosted 3 multidisciplinary meetings and 3 roundtable discussions bringing together experts from government, industry, and academia to develop the roadmap of collaboration strategies on the above-mentioned 3 topics from JEE evaluation report.
5. The research team has collaborated with NGO in the United States (ie, NextGen) to hold an international conference entitled "Global Health Security and IHR Implementation : Strengthening Partnerships and Collaboration" in Taiwan on November 08, 2017. In order to build up consensus, international and domestic experts, groups and stakeholders were invited to participate in the conference. Additionally, the TMU along with the Taiwan CDC also held a pre- conference workshop to promote Taiwan's achievement on the JEE in the 9<sup>th</sup> TEPHINT global conference on August 06 in Ching Mai, Thailand.
6. All the results of above activities, including evaluation, human resource development, strategic planning and international conference are included in the final report for publishing.

Keywords : Health Security, GHSA (Global Health Security Agenda), International Health Regulations, Joint External Evaluation, International Cooperation

## 目錄 Catalogue

Chinese Abstract.....	2	Abstract
.....	4	
Contents.....	6	
List of tables.....	8	
List of Figures.....	9	
Appendix Table of Contents ( 1 ) .....	11	
Appendix Table of Contents ( 2 ) .....	11	
1. Preface.....	12	
1. Research background.....	12	
2. Purpose of the project.....	twenty two	
3. Research goals.....	twenty three	
Four, plan changes.....	25	
II. Expected results.....	26	
1. Evaluate epidemic prevention strategies that can be developed in cooperation with the United States, Southeast Asian countries or countries with diplomatic relations... 2		
2. Continuous collection GHSA with JEE Evaluate development trends, as well as the state's public health preparation and epidemic prevention capabilities		
.....		
Three, through JEE Sharing and building a key epidemic prevention cooperation and training platform with the new southward country.....	27	
4. Holding a cross-field industry-government-university-research strategy planning meeting and developing a cooperative strategy roadmap.....	28	
5. Holding an international forum.....	28	
6. Publication of strategic results report.....	28	
Participation and project implementation results.....	29	
1. Evaluate epidemic prevention strategies that can be developed in cooperation with the United States, Southeast Asian countries or countries with diplomatic relations... 2		
2. Continuous collection GHSA with JEE Evaluate development trends, as well as the state's public health preparation and epidemic prevention capabilities		
.....	145	

Three, through JEE Sharing and building a key epidemic prevention cooperation and training platform with the new southward country.....	169
Fourth, hold a cross-field industry-government-university-research strategic planning meeting and develop a cooperative strategy path map.....	174
5. Holding an international forum.....	213
6. Publication of strategic results report.....	221
7. Matters to be completed outside the required specifications.....	222
Four, conclusions and specific recommendations.....	224
5, References.....	230

## Table of Contents

Table I, GHSA 11 Status of participating countries in this action plan.....	17
Table II, IHR The eight core competencies of... ..	19
Table three 2010 Philippines 10 Table of Causes of Death.....	36
Table four 2008 Analysis of Causes of Death of Men and Women in the Philippines .....	37
Table 5. Total number of visits and implementation results.....	46
Table 6. Results and benefits of the invitation... ..	137
Table 7. Africa 2016~2017 year JEE Assessment progress.....	145
Table 8. Americas 2016~2017 year JEE Assessment progress.....	147
Table 9. Southeast Asia 2016~2017 year JEE Assessment progress.....	148
Table 10. European area 2016~2017 year JEE Assessment progress.....	149
Table 11. Eastern Mediterranean Region 2016~2017 year JEE Evaluation progress.....	151
Table 12. Western Pacific Region 2016~2017 year JEE Evaluation progress.....	152
Table 13. Taiwan and the United States, Finland and Belgium JEE Consolidation table of assessment scores ...	154
Table 14. 2017 Year to 2018 year GHSA or JEE Meeting and event information summary table.....	163
Table 15. Vietnam TB , Dengue Fever Current situation analysis.....	169
Table 16. JEE Evaluation results.....	183
Table XVII. Roadmap of the strategy of communicable diseases between humans and animals.....	188
Table 18. JEE Evaluation results.....	189
Table 19: Path map of antibiotic resistance strategy.....	192
Table 20 JEE Evaluation results.....	193
Table 21. Path diagram of biosafety and biosafety strategies... ..	197

## 目 录

Figure 1. Organizational chart of the Philippine Ministry of Health.....	35
Figure 2. Organizational Chart of the Ministry of Health of Vietnam.....	41
Figure 3. Dean Xie Jicheng's speech to the masters and students of Beijing Medical University... ..	129
Figure 4. Dr. Tanarak Plipat and Ms. Keratikarn Kladsawas Group photo with the Beiyi team.....	130
Figure 5. Dr. Tanarak Plipat and Ms. Keratikarn Kladsawas Group photo with the Director of the Department of Disease Control...	130
Figure 6. Dr. Vernon Group photo with the Beiyi team.....	131
Figure 7. Dr. Vernon Group photo with the director of the National Health Administration and colleagues.....	131
Figure 8. Dr. Vernon Group photo with the Director of Disease Control.....	132
Figure 9. Dr. Wah-Yun Low The photo of the professor giving a lecture to doctors and students in North... ..	132
Figure 10. Group photo of Vietnamese foreign guests and the Director of the Department of Disease Control.....	133
Figure 11. Group photo of the head of the International Forum and foreign guests.....	135
Figure 12. Group photo of Indonesian foreign guests with the director of the CDC, colleagues and the team of Beijing Medical University.....	136
Figure 13. Group photo of Vietnamese foreign guests and the Director of the CDC.....	169
Figure 14. Group photo of Vietnamese foreign guests and vaccine company officials.....	170
Figure 15. The photos of Indonesian foreign guests visiting the tuberculosis center of Wanfang Hospital.....	172
Figure 16. Foreign guests from Indonesia and the University of Malaya Dr. Wah-Yun Low Group photo with the team of Beijing Medical University...	172
Figure 17. Flow chart of strategic planning meeting.....	174
Figure 18. GHSA Example of Strategic Roadmap (Vietnam Strategic Roadmap) .....	182
Figure 19. TEPHINET Group photo of participants in the pre-conference workshop.....	215
Picture 20. Group photo of the head of the International Forum and foreign guests.....	217
Figure 21. Photos of domestic and foreign experts on the sharing of humans and animals.....	219
Figure 22. Photographs of antibiotics and resistance experts discussing... ..	219
Figure 23. Photos of domestic and foreign experts on biosafety and biological preservation... ..	219
Figure 24. Director Zhou Zhihao replaced JEE Opening speech photos of the sharing session.....	222

Figure 25. Group photo of the cooperation meeting of the Epidemic Prevention Technology Transfer Center... ..... 223

## ~~附錄 目錄~~ Appendix Table Contents ( 1)

Appendix I. Plan to change meeting minutes.....	1
Appendix II- 1 , Monthly Work Report.....	7

## ~~附錄 目錄~~ Appendix Table Contents ( 2)

Appendix II- 2 , GHSA Activity summary.....	663
Appendix Three- 1 , Expert Consultation Meeting Minutes.....	966
Appendix Three- 2 , Round table discussion meeting minutes.....	985
Appendix IV- 1 , TEPHINET Preconference Workshop Meeting Information.....	990
Appendix IV- 2 , International Symposium on "Practicing Global Health Security and International Health Regulations: Strengthening Cooperation".....	1023
Appendix IV- 3 , "Practicing Global Health Security and International Health Regulations: Strengthening Partnerships" Roundtable Discussion Meeting Information Session .....	1226

## 1. Research Background

### (1) The background of international health security development

In recent years, the rapid development of globalization has been accompanied by the nature of health without borders, and the economic and political aspects of health And social issues are becoming more and more complex, such as 2003 Severe Acute Respiratory Syndrome ( Severe Acute Respiratory Syndrome, SARS) Global epidemic <sup>1</sup> , 2006 Asia Pacific H5N1 Bird flu epidemic, 2009 year of H1N1 Global pandemic <sup>2</sup> , 2014 The Ebola pandemic, which caused a large number of deaths in Africa, and 2015 The Zika virus, which has spread rapidly from Central and South America since 2000, has not only caused global panic repeatedly, but also affected people in dozens of countries around the world. Health and economic development, and these facts make public health issues overflow the original scope of domestic affairs and become International affairs produce closely related issues, and health issues have become increasingly important in the foreign policies of various countries. It also has the status of becoming a national security issue, affecting the political relations of bilateral and multilateral countries, and affecting international organizations such as the Trend of weaving. And such developments make health issues a part of national security and foreign policy, and pay attention to Discussing the possibility and response of global governance has gradually become the mainstream consciousness of the current international society. To protect the global population Avoid infectious diseases and large-scale disasters to achieve global health security ( global health security) Topics, but also important topics of global concern <sup>3</sup> .

Human security, even if human beings are in a state of "free from fear" and "free from want", it is the development of all countries. One of the ultimate goals of the exhibition, its concept first appeared in 1994 United Nations Development Programme ( UN Development Programme) "Human Development Report" ( Human Development Report) While discussing health and safety Heart is to avoid human safety that may be affected by health issues. Take infectious diseases as an example, 2003 New year infectious disease SARS At the beginning of the epidemic, under the shadow of China's delayed notification and frequent cross-border traffic, it quickly spread to The whole world, in just a few months, created a global total 774 Death and 8096 A case of infection, and besides causing harm to human health and life, it also impacted many areas such as trade, transportation, and tourism. SARS In the east If the economic loss caused by Asia and Southeast Asia is based on gross domestic production ( Gross Domestic Product, GDP) Impairment assessment Count, in 2003 Up to 180 100 million U.S. dollars, if estimated by total consumption, the loss is as high as 60 billion U.S. dollars! This 20 The first global emerging infectious disease event in the 21st century shocked the World Health Organization and governments of all countries. In the era of globalization, only through international cooperation can it be possible to prevent the transnational spread of international public health events and avoid To avoid a large number of casualties around the world, as well as unpredictable political and economic impact and social losses, under this consensus, the World Health Organization in 2005 year 5 month twenty three Ridi 58 World Health Assembly ( World Health Assembly, WHA) In the adoption of the amendment to the International Health Regulations ( International Health Regulations 2005, IHR 2005) , Its new version of the law



The content of the regulations not only expands the scope of the notified disease, but also introduces the text originally used in national security affairs to reduce the infectious

The political nature of global surveillance of diseases is included in the scope of the regulations, and international health regulations will be introduced and the national

The construction of domestic core competence is regarded as the core means to strengthen health and safety <sup>4,5,6</sup> .

According to the International Health Regulations, the World Health Organization sets a period for countries to enhance their core capabilities as 2012 ; But as of

2012 At the end, there is only 20% Countries achieve this goal. To assist countries in the world that do not meet the standards to construct their nuclear

The mental capacity is mainly initiated and supported by the United States to "help the world avoid the threat of infectious diseases" the "Global Health

Health Safety as the Primary International Safety Goal" Global Health Security Agenda ( Global Health Security Agenda, GHSA)

This cooperation structure and network is based on 2014 year 2 It will take effect when it starts operations at So far, there have been more than 40 Countries

join this global health safety network <sup>7,8,9,10,11,12,13</sup> .

The global health security agenda is mainly based on international health regulations IHR 2005 Based on the US Department of Disease Control ( US CDC)

As the center, linking the World Health Organization, the International Agriculture and Food Agency ( Food and Agricultural Organization, FAO) ,

World Organization for Animal Health ( World Organization for Animal Health) And other international organizations to provide financial and technical

( Equipment or experts) to assist countries in the network to build or improve their national core capabilities <sup>14,15,16</sup> And through

The monitoring method of network cooperation and information sharing is expected to achieve early identification of public safety threats so as to respond early.

Protect the world from the threat and harm of infectious diseases.

Currently GHSA By 10 Countries (Canada, Chile, Finland, India, Indonesia, Italy, Kenya, Saudi Arabia

### The Steering Committee ( Steering Group) To lead and take turns leading every year

Way to operate GHSA The internet. this year( 2017 year) GHSA The chairman of the steering committee is South Korea, and the current

of GHSA The chairman of the steering committee is the Deputy Minister of Social Affairs of Finland ( Permanent Secretary of Finland's Ministry of

Social Affairs) Of Päivi Sillanaukaa Doctoral position. and GHSA Under the steering committee

Support teams of multiple working levels and leadership groups for action plans, and these teams and group countries monitor GHSA

Implementation status in various countries. So far, GHSA Has been held 7 Plenary meeting, the most recent 2017

year 10 The ministerial meeting held in Uganda in October ( 4rd Annual Ministerial Meeting) .

For the purpose of global health and safety, GHSA Set 9 Goals to prevent ( prevent) , Detect( detect)

With strain ( respond) Three types of action plans ( Action Package) , In a period of five years, to specifically achieve its set goals

Mark. And because the International Health Regulations operate in a way that the country self-assess the level of its core capacity building, IHR View

Committee IHR Review Committee) In the 68 World Health Assembly ( WHA) Go on IHR Country import

(implementation) Topics, suggestions IHR 2005 "From absolute self-evaluation to a combination of self-evaluation and peer review

Consider and combine the voluntary external evaluation of domestic and independent experts ( ... to move from exclusive self-evaluation to

approaches that combine self-evaluation, peer review and voluntary external evaluations

involving a combination of domestic and independent experts) "

. Based on this recommendation, the World Health Group

Collaborating with organizations such as the Global Health Security Agenda to develop an external evaluation tool ( Joint External

Evaluation, JEE) As IHR 2005 Part of the monitoring and evaluation framework. Basically continued IHR 2005 and

GHSA the spirit of, JEE The purpose of the evaluation tool is to evaluate countries' independent prevention, detection and response to public health threats

Core competence, but JEE Not like IHR 2005 , Has a compulsory status in international law, so countries are not obliged to comply with

obligations, or adopt JEE Method to strengthen the core competence of its home country, which is only an assisting technical assistance

Aid tool, but its existence and essence is to strengthen the international health safety network through international cooperation, so JEE

The architecture actually strengthens GHSA The legitimacy and strength of the existence of the network, and increase the participation of

countries GHSA And such development has strengthened the diplomatic aspect of global health and security affairs, and GHSA As an unofficial group

Organization, its importance in international affairs 4 .

As global health security issues have the characteristics of rapidly affecting international relations in the globalization trend, 2007 year 3 month

20 Day time, 7 The foreign ministries of three countries jointly issued the "Oslo Ministerial Declaration" ( Oslo Ministerial Declaration) ,

It marks the strategic position of global health on international issues, and points out that due to health and the environment, trade, economics

Issues such as growth, social development, national security, human dignity, and human rights are all highly related. Today this is a globalized

Moreover, in a world where countries are highly interdependent, global health has a profound impact on both developed and undeveloped countries.

Far influence. In the face of current public health challenges, the Declaration proposes to respect the sovereignty of all countries as the basis, and to be transparent and trustworthy

Responsibilities, sense of responsibility, and fair sharing of responsibilities as a means of global cooperation, shaping a new type of global governance ( global

governance) Needs to ensure proper development, social and economic equality, fairness and justice, peace and

Safety 17 . And the UN General Assembly 2009 year 1 The August resolution confirmed the importance of this declaration. In this resolution, the

United Nations General Assembly not only confirmed the close interaction between foreign policy and global health, but also the international community's cooperation.

The importance of facing global health challenges, and decided to use "Global Health and Foreign Policy" ( global health

and foreign policy) This name is used to show the foreign policy essence of global health.

2013 In 1991, the World Health Organization also issued a document stating that the importance of global health diplomacy is gradually increasing. The reasons are four:

1. Although health is soft power, it is highly related to national security, trade agreements, and environmental and development policies.

All need to deal with cross-border challenges that may affect global stability-such as pandemics and climate change.

Under circumstances, health issues have become important issues in the field of diplomatic negotiations because they involve national security and economic interests.

Countries need to break through the framework of the original domestic ministries and committees to perform their duties, and develop a coordinated national and international

The different ministries and meetings have produced an "internal" unified global health strategy, so that the various departments in the country can perform on the global stage

Speak and negotiate with a consistent perspective and strategy.

2. The place to shape global health policies and the environment is not limited to the World Health Organization. Health has always been a United Nations summit. G7 , G20 And one of the main contents of many leaders' diplomatic conferences, many regional organizations have established in recent years to deal with health issues. Specialized ministries and meetings on the topic, and non-governmental organizations, foundations, and companies also have a deep focus on health issues. These actors (actors) In addition to promoting the advancement of domestic health affairs, they also play the role of global health diplomats on international occasions.
3. The new forms of global health assistance and cooperation have highlighted the importance of health diplomacy. Many have developed or are developing The long-term negotiation process of binding or non-binding agreements under development shows the importance of global health diplomacy. Sex, such as the World Health Organization 2010 The "Influenza Pandemic Prevention Framework — Virus sharing and vaccines and others Accessibility of interests ( Pandemic influenza preparedness Framework --for the sharing of influenza viruses and access to vaccines and other benefits, PIPF) ",as well as 2005 The "Tobacco Control The "Framework Convention on Regulations and Controls" and the "Protocol to Eliminate Illicit Trade in Tobacco Products" adopted by the subsequent Conference of the Parties. However, it involves important health regulations assisted by other units other than health, and the "United Nations Framework Convention on Climate Change" Should it be in 2015 The health goals are included in the development agenda after the year and are now in the process of negotiation. These international Both negotiations and development point to the importance of global health diplomacy.
4. The country needs competent health diplomats more urgently than ever, because the past models of health negotiations are no longer sufficient. More health negotiations involve the interaction of different governance levels, and the line between domestic and international policies is becoming blurred. However, representatives of various countries and other interested actors are increasingly focusing on dealing with issues in large-scale international negotiations with a long Health-related issues, but there are still many countries that cannot have sufficient resources to participate in these negotiations. Therefore, regional alliances and negotiation More important than ever <sup>18</sup> .
- Based on the importance of global health and security issues to the protection of our people's health, and its diplomatic resources

### Quality, through joining the global health safety network, with diplomatic and

Diplomatic relations, strengthen our country's core capabilities with Southeast Asia and friendly countries, as well as diplomatic and friendly relations, and cultivate medical and health Diplomatic talents for health and epidemic prevention should be the direction that our country must think and strengthen <sup>19</sup> .

( two) GHSA The latest development

In view of the recent international Ebola, MERS-CoV The emergence of emerging infectious diseases such as Zika virus infection, 2016 Year 69 World Health Assembly ( WHA) Appeal: The government can no longer just rely on past experience to make epidemic prevention plans. Epidemic prevention should be an overall plan at the national security level. At the same time, it requires joint efforts across countries and regions. Cooperation, advanced countries must be able to generously pledge to help developing countries establish international health regulations International Health Regulations (IHR) Standard core competence to fight infectious diseases together <sup>20,21</sup> .

In order to jointly prevent the threat of infectious diseases to global health security, 2014 United World Health Group

Weave World Health Organization, WHO) , International Agriculture and Food Agency ( Food and Agricultural Organization,

FAO), World Organization for Animal Health ( OIE ) And other international organizations and countries formally initiated the establishment of the "Global Health Security Agenda ( Global Health SecurityAgenda, GHSA )" to help developing countries reach IHR Core competence

It is hoped that through international multi-party cooperation, the global health security system will be strengthened. my country's implementation One Health( Epidemic prevention Body)'s ultimate goal, actively participate in related activities, and keep pace with the international WHO Newly announced joint external assessment tool JEE (Joint External Evaluation) Tool Carrying out a general inventory of national epidemic prevention, which is the world's No.

Eight countries that completed the inventory. This valuable experience and human resources in the implementation of the assessment will be used by my country to promote epidemic

The weapon is also a reference for my country's follow-up improvement in epidemic prevention capabilities and for becoming an international benchmark country.

( three) GHSA Introduction to Action Plan and External Evaluation Tools

JEE for 2016 year 2 Month World Health Organization ( WHO) The ``International Health Regulations: 2005 Joint external evaluations, estimate encourage member states to use this evaluation tool to conduct external evaluations voluntarily to identify the priority needs of the country in the health and safety system, And in this way, other countries that may provide resources to assist or cooperate, through the opportunity of forming an external evaluation team, together Participate in the assessment of the country and give suggestions on the allocation of relevant resources twenty two . The tool combines GHSA 11 Action plan, and IHR 8 Core competencies, total 19 These evaluation issues can effectively measure the country's ability to prevent, detect and respond to major public health threats.

2014 year 9 month, GHSA Held for the first time in Washington, USA High Level Event . At that meeting, GHSA 11 The action plan was formally formed. Its intent is to encourage North Korea GHSA The goal of each action plan is based on regional or global cooperation. 11 Different issues to achieve the purpose of cooperation. All support GHSA Goal Countries are free to participate in one or more action plans, and participating countries need to commit to each action The case is carried out on a cross-country, regional or global basis. On this basis, relevant technical experts from various countries will provide An action plan has successively reached important consensus, in 2014 year 9 At the monthly meeting, there will be 39 Countries have committed to join GHSA11 Action plan and encourage other countries to join the action plan twenty four . Table 1 is the basis of the research GHSA Organized by the latest information on the website 11 Action plan, participation of countries 27 .

Table I, GHSA 11 Participating countries of the action plan

Action Package	Action	Five-Year Target	Leading Countries	Contributing Countries	Contributing International Organizations
prevention- 1	Drug resistance microorganism Strategy Management Reason	Across humans, animals, agriculture, food In terms of material and environment, a country Complete and global activities to target the blue Drug resistance, (for example: Epidemic prevention) country	Canada, Germany Japan, the Netherlands Sweden, English	Australia, Bangladesh, Columbia Asia, Ivory Coast, India, India Nepal, Italy, Norway, grapes Saudi Arabia, Saudi Arabia, South Africa, Switzerland, Thailand, United States Zimbabwe	United Nations Food and Agricultural organizations, (FAO) World animals Health Organization (OIE) World Guard Health Organization ( WHO)
prevention- 2	Establish a Communicable Disease management	measurable zoonotic infection disease spreading behavior, policy, and actuality in Indonesia and Vietnam		Bangladesh, Ivory Coast, Finland Orchid, Georgia, Kenya, the Netherlands, South Africa, Sweden, United Kingdom, United States, Yemen, Zimbabwe	FAO , OIE , WHO
prevention- 3	Biosafety Whole system	Identify dangerous pathogens; biological risks Management training and education promotion; individual National biosafety management and safety Safeguard legislation, laboratory licenses, Pathogen control measures	Canada, Dan Azerbaijan, Bangladesh, Ivory Energy Agency individual Mai, Kenya, Secret Coast, Finland, Germany, Ghana, ( IAEA ) , International Lu, Portugal, Jordan, South Korea, Saudi Arabia Interpol Spain		FAO International Atom OIE , WHO
prevention- 4	Prevent Plan	Operation of the national vaccine delivery system, Effective distribution, do Italy and grapes for marginalized people Interview, proper cryogenic transportation and tooth holding Continuous quality control		Bangladesh, Ivory Coast, India Degrees, Mongolia, Pakistan, South Korea Kingdom, Saudi Arabia, Allah WHO United Kingdom Yemen	FAO , OIE , WHO
Detection- 1	Developing country Home experiment Chamber energy	Establish a national laboratory system and implement Biological real-time monitoring and effective Substitute bedside care and laboratory Baseline diagnosis	South Africa, Tanzania Asia, Thailand, America country	Bangladesh, Canada, China, Colombia, Ivory Coast, clothing Sobia, Finland, Georgia, Ghana, Israel, Japan, Horse Come to West Asia, Mexico, Peru, Saudi Arabia, Senega Seoul, Switzerland, United Kingdom, Yemen	FAO , OIE , WHO

Action Package	Action	Five-Year Target	Leading Countries	Contributing Countries	Contributing International Organizations
Detection-integrated 2/3	Instant and Monitoring Department Unify	Achieving detection is of great significance  Events; improve communication and collaboration,  <b>Significant for public health</b>  Monitoring of public health incidents, a Georgia Department The rights and responsibilities of the national and international classes,  Improve national and regional capacity, build  Real-time monitoring system		Argentina, Azerbaijan, Bangladesh  Latin America, Ivory Coast, Ethiopia  Asia, Finland, Ghana, Guinea  Peso, Indonesia, Israel, Italy  Italy, Kenya, Mexico, Norway  Granville, South Africa, United Kingdom, United States,  Yemen, Zimbabwe	FAO , OIE ,  WHO
Detection- 4	Good Department of Unify	According to the requirements of the World Health Organization,  And with the United Nations Food and Agriculture Organization and the World Bank Communication Unanimous agreement of the World Animal Health Organization  Adjust timely and accurate epidemic reports.	Bangladesh, Ivory Coast, Israel, France  Zimbabwe	FAO, OIE,  WHO	
Detection- 5	Epidemic prevention Power development	People can cooperate systematically,  To meet relevant international health regulations  Compete with the core of the prototype verification system  Competitive.	Jordan, Thailand  Ears	Bangladesh, Ivory Coast, Ethiopia  Biya, Finland, Mongolia, Saudi Arabia  Arabia, Senegal, United States  Yemen	FAO, OIE,  WHO
strain- 1	Build tight Emergency Commanding heart	Public health emergency response  The heart works; maintain training, operation,  Multi-departmental rapid response team and students  Even if the network of testing laboratories and  Information system; emergency response  Therefore, trained employees can start  Emergency response	Malaysia, Tubia, Kenya, Saudi Arabia  Ears	Bangladesh, Ivory Coast, Ethiopia  Bo, Senegal, South Africa, England  Countries, the United States, Vietnam, Zimbabwe	FAO, OIE,  WHO
strain- 2	Link public Total health And law profession, Cross-department Quick response change	Implement a rapid multi-department response,  And provide and/or effective and timely  International assistance, including investigation of suspected  The event used.	South Korea, Peru  of suspected	Australia, Canada, Finland, India  Nepal, Israel, Malaysia, INTERPOL,  Portugal, United Kingdom	OIE, WHO

Action Package	Action	Five-Year Target	Leading Countries	Contributing Countries	Contributing International Organizations
strain- 3	Responder Force and matter Rules Draw	During a public health emergency, There is a feasible framework for planning Transmission between international partners ( Send and receive) including medical pair Policy and Public Health and Medical Manpower	Chile, the United States	Canada, Israel, Mongolia	FAO, OIE, WHO

International Health Regulations ( IHR) The core competencies of the regulations are aimed at national or international public health risks or risks.

All Member States must use existing institutions and resources to meet monitoring, evaluation, incident reporting and notification,

The eight basic abilities of responding and responding to these eight abilities are relative to designated airports, ports, land routes and ports.

Response to hazardous events. Member States and WHO The annual status of the capabilities must be notified to WHA ,

As a measure IHR The degree of compliance and the basis for international assistance. The purpose of this measurement process is not to

It is a tool for international comparison and ranking of epidemic prevention performance, but to promote self-monitoring and improvement of countries to achieve compliance IHR

The required target 24,25 . Table two is IHR Of the eight core competencies.

Table II, IHR Eight core competencies

IHR Core competence	name	main content
Core capacity 1	National legislation, policy and financing	National Legislation should allow Compliance with IHR; Definition of implementing structures, organization, roles and responsibility
Core capacity 2	Coordination and NFP	Within Sectors: all levels of the HC System; Across sectors: Chemical, Food safety, Radio nuclear...; Leadership; Advocacy Event Based Surveillance;
Core capacity 3	Surveillance	Indicator Based Surveillance; Core Surveillance functions; Surveillance Structure for risk assessment, risk monitoring, investigation and control
Core capacity 4	Response	Rapid Response Capacity: Public Health Emergency Response mechanisms; Rapid Response Teams (RRT) at national and subnational levels; Case Management procedures for various PH hazard; Infection Prevention and Control (IPC) at health facilities of all levels; Disinfection, decontamination and vector control

IHR Core competence	name	main content
		capabilities for all hazards
Core capacity 5	Preparedness	Emergency Preparedness Programme; Emergency Preparedness and Response Plans; Risk and Resource mapping; Stockpiling; Capacity to support sub-national level
Core capacity 6	Risk Communication	Communication Coordination; Release of public information during an emergency; Listening to those affected and involved; Communication evaluation; Emergency Communication Plan Policy, collaboration and
Core capacity7	Human Resource Capacity	coordination framework between training institutions; Human resource capacity mapping; Continuous training in relevant areas; Field epidemiology training
Core capacity 8	Laboratory	Laboratory Services; Sample collection and transport; Biosafety and Biosecurity; Biosafety and Biosecurity; Laboratory based surveillance: Data Management and reporting systems

( Four) Participate GHSA versus JEE Challenges and opportunities after the assessment

GHSA Since it was set up two years ago, there have been 44 Countries participating JEE Based on the experience of the United States, 19 Evaluation issues 48 Of the evaluation indicators, except 7 The evaluation indicators are 3 In addition, other indicators are greater than or equal to 4 . This study is based on the experience of the United States for participation GHSA versus JEE Evaluation results <sup>26</sup> , The following challenges and opportunities are synthesized, which can be used as reference for our country:

1. challenge

(1) Collaboration ( coordination)

GHSA use JEE The goal is to achieve the goal of establishing national security defense capabilities and creating a world free from infectious diseases and other threats. The first challenge is coordination and cooperation ( coordination) , Including domestic The horizontal and vertical networks of relevant agencies coordinate and cooperate, and cooperate with foreign governments and NGO Cooperation between. This pick The war is also a great challenge for our country.

(2) Multi-country and multi-target cooperation

JEE The emphasized national core capabilities are not only the setting and achievement of multiple goals within the country, but also the emphasis on Foreign Cooperation Action Plan ( Action Package) The goal setting and achievement of the country's health Issues that require special attention in the security framework.

(3) Actual import ( implementation science) The gap

There must be a gap between the goal and the actual introduction. How to determine the most effective action plan introduction method and how to optimize it



The responsible agency needs to develop, test and evaluate related import models to protect the health of citizens.

(4) Promote sustained and stable financial resources for global health security.

## 2. opportunity

(1) Establish a technical work team

Participate in GHSA versus JEE Evaluation, on the one hand because 11 The integration of the action plan and evaluation tools requires the establishment of a cross-professional and cross-institutional; cross-country work team to ensure the quality of the introduction.

Evaluate the results, adjust and expand the work team and track and evaluate the work plan and content.

(2) Improve the ability to work together in epidemic prevention

By JEE The evaluation results provide the government with suggestions for the improvement of national health and safety, aiming at low scores

Understand and analyze the current situation, draw on the good performance of the country, plan improvement plans, and implement and track

Monitoring to enhance the integrated ability of epidemic prevention.

(3) Pay attention to the implementation of science ( implementation science) Research

Here, the purpose of implementing science is to strengthen global health prevention through operational research and other methods.

Empirical analysis of data identifies the gap, and develops models and methods that may solve the problem, and studies

Evaluate and test the effectiveness of the model and method at the same time. If the model and method are proved to be effective, that is

Translated into actual imported strategies and practices, and finally imported content.

## 2. Project Purpose 計畫目的

The purpose of this plan is to promote global health and security issues, achieve the establishment of national security defense capabilities, and create freedom from infectious

Other threats to security goals; these all depend on Taiwan's efforts on this issue, including the horizontal and vertical levels of relevant domestic institutions

Network coordination and cooperation, as well as with foreign governments and NGO Cooperation between my country's sanitation and safety

The visibility of international participation in order to promote new opportunities for epidemic prevention cooperation and enhance my country's and international participation (including

It also uses the exchange of experience to strengthen domestic cross-departmental and cross-field integration.

### 3 Research goals 研究目標

Our country 2015 With the assistance of the United States, actively participate in GHSA Related activities and on 2016 year 6 month twenty one Day to 7 month 1 During the day JEE Tools to conduct field assessments to identify the country's priority needs in the health and safety system. Under the premise of promoting international health and safety, my country must also have relative challenges and opportunities. Therefore, the purpose of this plan is to focus on Participate in our country GHSA Related activities, and completion JEE Evaluation, for the goal of building an integrated epidemic prevention and global health security, The following work items are planned to be completed.

( 1) Analyze the status of the United States, Southeast Asian countries or diplomatic countries GHSA versus JEE The latest developments on related issues are reported to the Disease

Evaluate the epidemic prevention cooperation strategies that my country can develop with the aforementioned countries

1. For Vietnam, Indonesia, Myanmar, Laos, the Philippines and other countries, their epidemic prevention systems and local infectious disease prevention needs or our

Technically transferable dengue fever and tuberculosis issues, etc., through the academic network of Beijing Medical University, evaluate and collect Myanmar, Laos and

Based on the sentiments of the Philippines and other countries, policy recommendations for cooperation strategies have been developed.

2. Through JEE To share the goal of building a key epidemic prevention cooperation and training platform with the new South Asian countries, and with Southeast Asia

National infectious disease prevention and control experts cooperated and visited the Department of Health of Quang Ninh Province of Vietnam, University of Indonesia,

University of Malaya, Malaysia.

3. Invite university professors or governments from Southeast Asian countries (Thailand, Indonesia, Malaysia, Singapore, Vietnam, Belize, etc.)

The disease management officials GHSA Its strengths include speeches or short-term lectures in my country and the establishment of epidemic prevention communication

( 2) Continue to collect information on the international community of the United States and other Southeast Asian participating countries GHSA with JEE Assess development trends, and

Information on public health preparation and epidemic prevention capabilities

1. Through literature and government public information verification, understand the current situation of my country's national defense epidemic, and echo JEE The results of the

The direction and problems of my country's integrated epidemic prevention.

2. According to our country JEE After the evaluation, an expert meeting was held to discuss the allocation and utilization of resources and suggest improvements

The order of priority.

3. Continue to collect the United States and other countries (including Southeast Asia), in the international community GHSA with JEE Evaluation

Data on development trends, as well as data on practical practices that can be used as a reference for the improvement of my country's public health and epidemic prevention

4. The results of the information search are collected into a book on a monthly basis, and the work report is submitted to the Disease Control Department.

( Three) through JEE To share the establishment of a key epidemic prevention cooperation and training platform with the new southbound country, and build a

key epidemic prevention cooperation with the new southbound country

1. JEE Sharing and establishing key epidemic prevention cooperation with the New South

With the topic of dengue fever or tuberculosis prevention, reference JEE and GHSA Action plan ( Action Package) , Combined with the CDC's

strategic model of establishing an anti-epidemic technology transfer center, through the Northern Medical Technology Network to establish a relationship with Vietnam and

Taiwan, deepen the cooperation between Indonesia and Vietnam.

2. Invite international implementation JEE The assessment experts come to our country for training and performance.

Implemented by inviting the United States or Southeast Asian countries JEE Experts assessing practical experience and relevant Chinese anti-epidemic talents in the country.

It handles academic speeches and training in order to train relevant personnel for epidemic prevention in my country.

( 4) Establish a communication platform for relevant epidemic prevention cooperation topics — Against our country JEE Report the most important items for improvement

1. Hold at least 3 A cross-field strategic planning meeting of industry, government, academic and research experts.

2. According to the results of the above meeting, the development of at least 3 Projects promote themes, and establish a road map of cooperation strategies for each theme.

( 5) Participated with the United States GHSA Initiative or JEE Cooperate with assessment institutions to organize international forums in China and abroad

1. Two international seminars are held, and one is expected to be held in conjunction with Thailand TEPHINET Annual meeting, application Preconference

Workshop , The other was held in Taipei City.

2. Three to four round table meetings.

( 6) Organize the above evaluation survey, talent cultivation, strategic planning and the content of the forum results into a strategic report to be published and distributed

All participating groups and individuals

## 四. 計畫變更

This project is in response to the 2017 year 3 month 30 Contact the requirements raised at the meeting on Japan, change some of the project goals, detailed meeting minutes are shown in Appendix 1.

In response to the government's new southbound policy, the team made the following changes to the implementation of the plan based on the recommendations of the Disease Control Agency ( 1) Analyze the status of the United States, Southeast Asian countries or diplomatic countries GHSA versus JEE The latest developments on related issues are reported to the Disease Control Agency

Evaluate the epidemic prevention cooperation strategies that my country can develop with the aforementioned countries

1. Adjust the countries in Southeast Asia to be the new south-facing countries such as Vietnam, Indonesia, Myanmar, Laos and the Philippines.

Local infectious disease prevention needs, dengue fever and tuberculosis issues that we can transfer technology to, etc.

Collect market information and develop policy recommendations for cooperation strategies.

2. Adjust the plan for going abroad. Delete the original plan to visit Singapore, friendly countries and Uganda 8 Visits to Vietnam and India

Nike 10 Person times.

3. JEE To share the work project of establishing a key epidemic prevention cooperation and training platform with the new South Asian country, and increase the number of Indonesia

Invited visits by experts from Sri Lanka epidemic prevention.

( B) Through JEE To share the establishment of a key epidemic prevention cooperation and training platform with the new southbound country, and build a key epidemic prevention cooperation with the new southbound country

The plan was to assist countries with diplomatic relations JEE As the goal of the assessment, we plan to invite officials from the country and send personnel to the country To communicate, train and assist. After the recommendation of the Disease Control Agency, it was changed to establish epidemic prevention with new southbound countries (s Cooperation and training platform to increase international cooperation. At the same time, in response to this amendment, the team adjusted the invitation plan and increased Countries such as Vietnam, Indonesia and Belize.

## 貳、預期成果

### 一、評估可與美國、東南亞國家或邦交國家合作發展之防疫策略

America is GHSA and JEE Of the sponsoring country, based on the importance of the global health security network to its national security and diplomatic network Sex, the United States not only actively promotes GHSA , And there is an agenda dedicated to this topic at important academic seminars. This plan It is planned to participate in relevant important academic seminars in the United States and visit relevant units and experts (such as JHSPH Center for Health and Safety, and Joe Governing the University of Washington Rebacca Katz Professor), strengthen and GHSA and JEE The way of exchange and cooperation of experts is to conduct research and analysis on this topic.

Except for the United States, this project is different from reviewing Southeast Asian countries GHSA The depth of the project's participation, understand the current Southeast The degree of participation of Asian countries on this issue, and the selection of partner countries based on it.

Taipei Medical University has signed sister school relations with many Southeast Asian universities, and has close academic exchanges and cooperation.

#### Asia-Pacific Public Health Academic Alliance ( Asia Pacific Academic

Consortium for Public Health, APACPH) The academic alliance has occupied an important position for many years, including Qiu Wenda, the former principal of Beijing Medical University Former chairman and vice president Qiu Hongyi now serves as vice chairman of finance. Professor Qiu Yawen Cheng of Global Hygiene is now the regional director of Taiwan.

Therefore, on this basis, this project will not only cooperate with Thailand Massidou University, the University of Indonesia, the University of Malaya and the University of Singapore in

Cooperation with relevant experts from important countries IHR 2005 The introduction of the country, the introduction of the global health, safety and epidemic

prevention network and related topics, conduct cooperative research, and conduct research and analysis on the epidemic prevention cooperation project of its cooperation with my country

As a platform for my country's epidemic prevention experts and global health scholars to actively participate APACPH The administrative work that finally enabled Taiwan to

By APACPH This international academic organization can speak on behalf of Taiwan, and it can also use this platform to conduct substantive discussions with other Asian countries.

Cooperative research on the prevention and control of infectious diseases.

After discussing with the Department of Disease Control, the team decided to implement the work item as follows:

( 1) For Vietnam, Indonesia, Myanmar, Laos, the Philippines and other countries, their epidemic prevention systems and local infectious disease prevention needs or we can only

Technology transfer of dengue fever and tuberculosis issues, etc., through the academic network of Beijing Medical University, evaluate and collect Myanmar, Laos and Philip

Bin and other countries' sentiments, and based on this, developed policy recommendations for cooperation strategies.

( 2) Visit the George Washington University School of Public Health, located in Washington Next Gen as well as JHSPH Health and Safety Research

Research Center ( JHSPHCenter for Health Security) , Participated by The Knowledge Foundation Held third

Global Biodiversity Summit, and GHSA and JEE Experts in the field established substantial cooperation and exchanges, and 105 Annual

commission UPMC Executed by the Health and Safety Research Center JEE The project in the evaluation report of the plan discusses how to

design courses for my country's weaker links to empower the government and academia in China.

( Three) through JEE To share the goal of building a key epidemic prevention cooperation and training platform with the new southward countries, and to cooperate with Southeast Asi

Infectious disease prevention and control experts cooperated and visited the following countries:

1. Vietnam, visited the Department of Health of Quang Ninh Province, and discussed with the Director of Health and the GHSA , JEE

and Roadmap Exchange opinions on other topics and study the possibility of cooperation. Intensive cooperation in the transfer of epidemic prevention technology

Discussion on the pre-work of the project cooperation. Invite professors or government officials from Vietnam's league schools to visit our country on the country's strength

Establish a communication channel or platform for epidemic prevention through speeches or short-term lectures.

## 2. Thailand, visit to Mahidol University in Thailand ( Mahidol University) And the competent authority of the national defense epidemic to participate in the Asia-Pacific Public Health

Academic Alliance ( APACPH, Asia Pacific Academic Consortium for Public Health) The first Thailand District

Regional Conference and the Eighth International Public Health Conference. With Mathieu University in Thailand GHSA versus JEE Establish

substantive cooperation on the topic, and invite Thailand's Mahidou University professors or government disease management officials to give speeches or short-term lec

Establish an epidemic prevention contact channel or platform. During the conference of the Asia-Pacific Public Health Academic Alliance

Invite the country to engage in GHSA versus JEE Experts and scholars from Taiwan visited Taiwan.

## 3. Indonesia, visited the University of Indonesia and the GHSA versus JEE Issue establishment

Qualitative cooperation, and invite Indonesian university professors or government disease management officials to establish speeches or short-term lectures on the stre

Epidemic prevention contact channel or platform. Discuss the preparatory work of the cooperation plan for the transformation of epidemic prevention technology deep cul

## 4. Malaysia, visited the University of Malaysia and the national defense GHSA versus JEE

Establish substantive cooperation on the topic, and invite Malaysian university professors or government disease management officials to speak to our country on the cou

Or short-term lectures to establish an epidemic prevention contact channel or platform.

## 二、持續蒐集 GHSA with JEE 評估發展動向，以及國家公衛整備和防疫能力的情資

The implementation method of this work item is: understand the current situation of our national defense epidemic and respond JEE The results of the evaluation clarify the

The direction and problems of integrating epidemic prevention. Continue to collect the United States and other countries (including Southeast Asia) that can be used for reference, in the

Up GHSA with JEE Evaluation of development trend data, as well as practical examples that can be used as a reference for the improvement of my country's public health and epidem

Practice information. The results of the information search will be compiled into a book on a monthly basis, and the work report will be submitted to the Disease Control Department for

## 三、透過 JEE Sharing and Building Knowledge Center, enhance cooperation and training platform with the new South

The execution method of this work item is:

- ( 1) For the topic of dengue fever or tuberculosis prevention, reference JEE and GHSA Action plan ( Action Package) , Combined

The CDC's strategic model for establishing an epidemic prevention technology transfer center to establish contacts with Vietnam and Indonesia through the Northern Me

Platform, deepen the cooperation between Vietnam and Indonesia.

- ( 2) Implementation by inviting the United States or Southeast Asian countries JEE Experts assessing practical experience and relevant Chinese anti-epidemic talents in the cou

It handles academic speeches and training in order to train relevant personnel for epidemic prevention in my country.

This work item is combined with the aforementioned work item "Evaluation of International Cooperation and Development of Epidemic Prevention Strategies" and will be carried out at

#### 4. 舉辦跨領域產官學研策略規劃會議並發展合作策略路徑圖

Against our country JEE Report the most important items in need of improvement. After discussing with the Disease Control Department, Antibiotic resistance , "Biosafety and Biosafety" is the theme. Based on Epidemic Prevention ( One Health) , Due to the Prevention and Inspection Bureau of the Council of Agriculture World Organisation for Animal Health OIE Of PVS Evaluation ( Performance of Veterinary Service) , Passed on between humans and animals Infected disease management, biosafety and biological preservation and other topics, the Council of Agriculture will be invited to participate in the assessment of expert lectures or report Content, in order to take into account the integration of epidemic prevention.

Implementation method of this work item: hold 3 A domestic cross-field industry, government, academic and research expert strategy planning conference, the theme is "People Zoonotic Infectious Diseases", "Antibiotic Resistance" , "Biosafety and Biosecurity" and other issues, for the implementation of strategic planning meetings Design recommendations for each discussion 2 Strategies, 3 The strategic planning meeting 3 Strategies have 2 The opportunity for this discussion makes it easier to focus on converging conclusions.

#### 5. 舉辦國際論壇

According to our country JEE The results of the evaluation, and borrowing the successful practices of other countries to plan the way and content of the forum, To achieve the purpose of enhancing our national defense and epidemic integration capabilities. How the forum is held and JEE Improve the combination of directions and invite experts Announce the improvement results or successful cases of various countries. In addition to the forum, international and domestic experts are also invited to discuss Table meetings and in-depth discussions. Participants in my country will be mainly key personnel from various institutions and majors responsible for epidemic prevention.

The implementation method of this work item: hold two international seminars and three to four round table meetings to meet the invitation of international experts It is cost-effective at home and can increase the learning opportunities for professionals related to the national defense epidemic. One of the international seminars combined Thai country 8 Held in the month TEPHINET Annual meeting, application Pre-Conference Workshop , Invite our country CDC Officials and east Published by relevant experts in South Asia JEE Efforts or successful cases to increase my country's international visibility. Another international forum 11 month 8 Day was held in Taipei City to increase participation and visibility.

#### 6. 出版策略成果報告

Implementation method of this work item: The research results are organized into a mid-term report and a final report. The final report includes:

- ( 1) Diplomatic countries and domestic JEE Organize the results of integration with epidemic prevention.
- ( 2) Annual meeting and international forum results materials.
- ( Three) Road map of three strategies.



## Participation and Project Implementation results

In order to achieve the promotion of domestic health and safety issues in this project, the Department of Disease Control and the Taipei Medical University team cooperated, Taiwan. Starting from the role of a "think tank", the Medical University team completed the tasks scheduled for this project. The executive outline is briefly described as follows:

1. Evaluation of epidemic prevention strategies: The Beijing Medical team uses the role of a think tank to provide information on different countries in the department, such as political and economic relations, health and medical care, current status of infectious diseases and bilateral relations, etc., to assess possible future cooperation and channels for establishing contacts.
2. collect GHSA and JEE Emotional resources: The Beijing Medical team uses the role of a think tank to analyze each field from different perspectives in the department GHSA and JEE Activities, to explore the core values of each activity and future development trends, etc., to evaluate the feasible health and safety methods of our country in the future need.
3. Establish key epidemic prevention cooperation, etc.: The Beijing Medical team, as a think tank, provides contracts with different identities in the department to build epidemic prevention cooperation. Under the influence of political, economic, geographical and related factors, it is difficult for central government units to directly establish bilateral relations with other countries. Through the cooperative relationship, so through the network connection of the executive team, the opportunity of transnational epidemic prevention technology transfer cooperation is achieved.
4. Development strategy roadmap: The team of Beijing Medical University provides plans and suggestions for future health and safety in the department as a think tank. JEE The evaluation results and the department reached a consensus and selected 3 Topics: zoonotic diseases, antibiotics and drug resistance, biological safety Full and biological preservation, develop the future 5 A strategic road map for 2015 to achieve the goal of integrated epidemic prevention.
5. Holding international forums: The Beijing Medical team used the role of think tanks to gather health, safety and epidemic prevention talents from various countries to hold two international forums (Chiang Mai, Taipei), in the forum, invite experts to share the current state of health care in various countries, GHSA and JEE Experience, etc., strong Develop multilateral exchanges, master information, domestic talent training and international visibility.
6. Publication of strategic results report: The Beijing Medical team used the role of a think tank to integrate the above implementation results, and developed a strategic results report. Contains diplomatic relations and domestic JEE Integration with epidemic prevention results, annual meeting and international forum results, and three strategic roads Path map for reference in the development of future health, safety and epidemic prevention policies within the Department.

## 一、評估可與美國、東南亞國家或邦交國家合作發展之防疫策略

Due to the needs of the policy adjustment plan, this project is carried out in Southeast Asian countries such as Vietnam, Indonesia, Myanmar, Laos and the Philippines. Countries such as the Philippines, discuss the national defense system and the local infectious disease prevention and control needs or the dengue fever and tuberculosis that we can Questions, etc., are evaluated and collected through the academic network of Beijing Medical University. After the evaluation of the project team, according to the Priority will be given to Myanmar, Laos, and the Philippines as the main information-gathering countries for the exchanges, interactions and information and resources of the country. In addition, due to the current global situation of infectious diseases, according to the World Health Organization (WHO), Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund to Fight HIV/AIDS, TB and Malaria) And the World Bank (World Bank) The description is based on AIDS, tuberculosis and Malaria is an infectious disease currently prevalent in the world. The overall political and economic environment, health and medical conditions, and infection are carried out by the international. The summary of the disease situation and the presentation of the school's bilateral relations with its academic research, exchanges and interactions or official visits in recent years will And to supplement the entry points and policy recommendations of its epidemic prevention cooperation strategy.

## ( A) Myanmar

### 1. Overall political and economic environment

The country of Myanmar is called the "Republic of the Union of Myanmar" ( The Republic of the Union of Myanmar ) , The area is about 67 Million 6000 Square kilometers, the northeast borders with China, the northwest borders India and Bangladesh, and the southeast borders Thailand and Laos; Approximate population 5,148 Million people ( 2014 Annual census), total 135 Nationalities, mainly Burmese, Shan, Karen, etc.; the main language is Burmese, 9 Adults believe in Buddhism; Myanmar has experienced long-term military rule and has gradually implemented democratic reforms and opening up in recent years. 2010 year 11 Held monthly 20 The first general election in the year 2011 year 2 Thein Sein ( Thein Sein) Serve as president. 2015 year 11 After the election 2016 year 3 President Tin Aung Mye Thaw ( Htin Kyaw) The special status of the Burmese army is guaranteed by the constitution; Burma has superior geographical conditions, rich natural resources, and economic development is still in its infancy; foreign investors mainly invest in oil, natural gas, minerals and tourism in Burma Wait; 2015 Myanmar GDP for 730 Billion dollars, the average national income 1,419 US dollars; total health expenditure per capita ( 2014) for 103 US dollars, total health expenditure accounted for GDP The ratio is 2.3% (2014) ; The main trading partners are Thailand, China, Singapore and India.

### 2. Overall health

According to World Health Organization data ( 2015 ) , The total population of Myanmar is 53,897,000 people( WHO, 2015) Myanmar has resources Under limited circumstances, it has been striving to achieve its health goals and maintain the trend of key health indicators. Burmese life expectancy male Sex is 65 Years old, women are 68 year old.

The health unit in each township in Myanmar is under the responsibility of the township medical institution, with approximately 10 Wanzhi 20 Million people. In villages and towns, hospitals and clinics provide services such as care and treatment, while the health department is responsible for public health. The city's health center, The school health team and the maternity and child health center take care of the urban population. Every township has at least 1-2 Resident hospitals and 4-7 Individual farmer Village Health Center ( Rural Health Centre, RHC) , To provide health services for the rural population. By the rural health center Health Assistant , Lady Health Visitor And midwife. In each rural health center, there are four to five sub-centers, and each sub-center is staffed with midwives and public health supervisors. Each center consists of five to ten villages, usually only volunteer health workers (auxiliary Midwives and community health workers) to provide health services. Myanmar human resources are estimated to have 88,975 Public officials, including 26,435 Doctors, 25,544 Nurses and 19,556 Midwives. Equivalent to every 1000 In the population 1.49 Health workers

Author.

" Myanmar 2030 Health vision " in 2000 It was formulated in 1999 to improve the health and development of the people of Myanmar. One of the contents is to guide various types of medium-term national health development. The World Health Organization Myanmar National Health Cooperation Strategy 2014-2018 with Future health challenges. The Ministry of Health of Myanmar supports this ambitious long-term health development plan, Development planning outline, rural health development plan outline, upgrading hospitals and national education plan "2011-2016 National Health Plan ( NHP ) " Therefore, the National Health Plan is part of Myanmar's national economic development blueprint. it Considering the general health problems in the country, it is necessary to achieve the health-related goals of the Millennium Development Goals and strengthen the Millennium Development Goals. The meaning of the target includes increasingly important health determinants such as the health system, social economy and environment ( WHO

## Country Cooperation Strategy brief) .

- Infectious disease overview

### (1) AIDS

Myanmar as of 2015 Annual statistics nationwide twenty two Ten thousand people are infected with AIDS, the prevalence rate is about 0.8% , Of which adult women have about 7.7 Million people, 14 Approximately 9500 people( UNAIDS, 2015) . The main route of AIDS infection is drug injection ( 23.1%) Followed by inter-male sex ( 6.6%) And female sex workers ( 6.3%) . Government's response to national AIDS

The action demonstrated strong political commitment, and has been received by the United Nations and bilateral agencies, international and local NGOs ( NGOs )

The firm support of private entities and civil society. AIDS is the focus of the current national health plan, and senior officials

Members openly support HIV-related activities. 2014 In · the government introduced antiretroviral drugs ( ARV ) Dial out 500 Wanmei

Yuan, the cost of methadone maintenance treatment is 100 Ten thousand U.S. dollars( GlobalAIDSResponse Progress Report Myanmar,2015) .

### (2) tuberculosis

Myanmar is the world twenty two High tuberculosis ( TB ), the prevalence of tuberculosis is the highest in Asia, About three times the global average. 2010 Myanmar is estimated to have 18 10,000 new cases of tuberculosis, including 4 Wando is a child. The country is estimated to appear every year 9 000 Cases of multi-drug-resistant tuberculosis ( MDR-TB ) Cases, extensively drug-resistant tuberculosis ( XDR-TB ) Has been detected. In order to achieve the Millennium Plan of the World Health Organization, Myanmar is also actively improving the local tuberculosis situation.

Conditions, including better treatment of infected patients and an increase in the cure rate, and a more comprehensive and effective national tuberculosis monitoring and testing system. The implementation of schools, monitoring the prevalence of high-risk groups, etc. ( Tuberculosis in Myanmar Progress, Plans and Challenges, 2015) .

### (3) malaria

The estimated population of malaria in Myanmar is 450 Million people (2009 year), accounting for the country's population 8 % . All this 39 Township The hills and mountains where most countries live. on average, 1999 to 2009 During the year, the burden of malaria in this region accounted for 13 % ( 79,664 example) , Among the national malaria deaths 33 % Trending here ( 317 Death) .

The highest morbidity and mortality were found in the border areas of Myanmar, India and Myanmar and Thailand respectively. Malaria incidence and The mortality rate is relatively higher than that of the towns in central China.

The National Malaria Control Plan supports all 39 Prevention and control of malaria in each township, 36 Towns ( 92 %) received from WHO, UNICEF and Three Diseases Fund ( 3DF ) Additional support for malaria prevention and case management. Is expected to be soon The Global Fund 9 More financial support will be provided under the round of funding.

## 3. Description of bilateral relations

According to investigations, the school has no record of signing a memorandum of cooperation with relevant academic research institutions in Myanmar. 2014 year 7 month 12 The Japanese school went to Yangon, the capital of Myanmar, to hold a "medical case sharing press conference on the health Promotion and introduction of hospital service concept and special medical care. 2017 year 8 month twenty four On the other hand, the Global Health and Development Master's degree program in collaboration with the Global Local Action Charity Association invites the "Myanmar Teresa" and has won the "Medical Nobel Prize"

"May Dao Clinic ("Jonathan Mann Global Health and Human Rights Award") Mae Tao Clinic )

Cynthia · Monger

division( Dr. CynthiaMaung ) Hold a seminar to share the medical life of more than 20 years of service in the Thai-Myanmar border and the Meidao Clinic

He grew into an important health service and education and training institution in the border.

In addition to the above bilateral exchange activities, Director Qiu Yawen of the National Health Program has long participated in the Asia-Pacific Public Health Academic Alliance. For this reason, the Taiwan regional director of the alliance has established a deep and friendly relationship with the important cadres of the alliance.

Director of the Department of Health Sciences and Chairman of the Asia-Pacific Public Health Academic Alliance Dr. Masamine Jimba Its assistant professor Dr. Akira Shibamura ,

The two have long-term and intensively cultivated in Laos and Myanmar to conduct academic research projects on Myanmar's epidemic prevention system and local infectious diseases.

Should be able to provide effective assistance, bilateral cooperation in academic exchanges, if it can promote the future needs of the plan, consider

This is the object of further contact.

## ( B ) Laos

### 1. Overall political and economic environment

Today Laos originated from the ancient kingdom of Vientiane and was founded in 14 Century; for three hundred years, Vientiane has been

And all phenomena in Laos now have an impact. After hundreds of years of gradual decline, the Lao people were affected by Siam (Thailand)

Rule from 18 End of the century 19 At the end of the century, it became part of France and India. 1907 Year " France-Siam Treaty " Defines the current border

of Laos with Thailand. 1975 In 1991, the Lao communists took control of the government, ending nearly six hundred years of

The monarchy of China has established a strict socialist regime that closely cooperates with Vietnam. 1988 Private enterprises gradually returned to

The liberalization of commercial investment laws began. Lao Yu 1997 Became a member of ASEAN in 2013 Become WTO member. The main language is

Lao, and the capital is Vientiane. Geographically located in the northeast of the Indochina Peninsula, it is the only landlocked country on the peninsula. It is adjacent to Vietnam in the

It is bordered by Cambodia, Thailand in the west, Myanmar in the northwest, and Yunnan Province in the north. 236,800 Square kilometers. In recent years,

The economy of Laos has developed rapidly. 2001 Year to 2005 The average annual economic growth of Laos 6.2% . 2005 In 2015, the gross domestic

product of Laos was about 29.2 Billion USD, a year-on-year increase 7.2% . According to the sixth five-year plan of Laos, to 2010 In 2015, Laos will achieve

a GDP ratio 2000 The goal of doubling every year, striving to eradicate poverty, to 2020 Get rid of the ranks of the world's low-developed countries. Gross

national product 120 One hundred million U.S. dollars( 2014 Years), average national income 1,660 USD ( 2014 year). Total per capita health expenditure ( 2014)

for 98 US dollars, total health expenditure accounted for GDP The ratio is 1.9% (2014) ( Taipei Economic and Cultural Office in Vietnam,

2016; Central Intelligence Agency- The World Factbook) .

### 2. Overall health

According to World Health Organization data ( 2015 ) , The total population of Laos is 6,802,000 people. The Lao People's Democratic Republic is reforming

Significant progress has been made in improving the health of citizens, with life expectancy in 2015 Reach male 64 Years old, female 67 year old. Progress

in service delivery and access to health services is reflected in achieving most of the health-related Millennium Development Goals. Lao Government

Commit to increase investment in basic health care to ensure that remote mountainous areas have access to equal health care services, so as to reduce children

The goal of child mortality. On the other hand, the national policy is committed to strengthening the health system and

The expected new health challenges arising from the development of economic development, the deepening of regional integration and climate change. After getting rid of the ranks of

The health department allocates additional domestic resources to compensate for the reduction in external support.

Public health expenditure in Laos is still low, and medical and health services still rely on out-of-pocket expenditure and external financing. Less than 15

% Of the poor have health insurance, and health hazards are considered to be the main factor in falling into poverty. " 2013-2025 Health Department of Laos

Reform" provides the realization of a resilient health system in 2025 Covering the health of the entire population last year, including the increase in domestic health expenditures

plus( LAO PEOPLE'S DEMOCRATIC REPUBLIC–WHO Country Cooperation Strategy 2017–2021) .

- Infectious disease overview

### (1) AIDS

Laos as of 2015 Annual statistics nationwide 1.1 Ten thousand people are infected with AIDS, the prevalence rate among adults is about 0.3% , Of which adult

Female dating 4900 people, 14 The number of children under the age of infection is less than 1000 people( UNAIDS, 2015) . As of 2016 End of the year,

Locally in Laos ARV Treatment coverage is only 33.91%

In the past ten years, WHO has provided recommendations to the National HIV Program of the HIV/AIDS and Sexually Transmitted Infection Center.

Provided technical support to strengthen HIV prevention, care, treatment and support, and established the Ministry of Health and non-governmental departments

Competence organizations, especially organizations involved in HIV/AIDS and sexually transmitted infections. In HIV consultation and testing,

Provided technology in the areas of laboratory services, monitoring and evaluation, antiretroviral guidelines, procurement and supply management, and community participation

stand by. WHO has also helped the National AIDS Program to carry out a global fight against AIDS and tuberculosis through local governance mechanisms.

Disease and Malaria Fund's activities.

### (2) tuberculosis

The National Tuberculosis Programme 1995 It was implemented in 1991, so that primary health care at all levels (central, provincial, district, health

Center) full coverage. WHO has already cooperated with the Ministry of Health (Ministry of Health, Food and Drug Administration) and community groups

The organization cooperates to allow private practitioners, especially private doctors at the community level, to report case testing, treatment and care. 5 Among

Central Hospital, 18 Provincial hospitals, 148 Regional hospitals and 954 In health centers 903 ( 95 %) include tuberculosis services in primary health

care. from 2013 year 7 Since the beginning of the month, the National Tuberculosis Guidelines (No. 3 Edition) has been published and used. National

Tuberculosis Programme since 2013 Has been testing the use of modern molecular tuberculosis and multidrug-resistant tuberculosis for years

( GeneXpert ) Expansion of the rapid diagnosis method target to nationwide ( WHO , 2014) .

### (3) malaria

The prevalence of malaria in Laos is quite high, but about 97 % Of cases occurred in hilly and forested areas in the south of the country.

2013 In 1991, the first outbreak of multidrug-resistant malaria occurred in Laos in the southern provinces. In order to achieve 2025 Elimination of

Plasmodium falciparum (including multiple drug resistance) years ago, 2030 To eradicate all kinds of malaria two years ago, the World Health Organization will provide Lao

The province is affected by multi-drug resistant malaria, and gradually progresses to the northern Mekong region to eliminate malaria. Currently the United Nations and Laos

In the prevention and treatment of malaria, the country mainly focuses on the research and use of antimalarial drugs, the research and development of pesticides, and supports th

PEOPLE'S DEMOCRATIC REPUBLIC–WHO Country Cooperation Strategy 2017–2021) .

### 3. Description of bilateral relations

After investigation, there is no record of signing a memorandum of cooperation between our school and academic research institutions in Laos.

The exchanges and interactions between China and Laos have not yet been achieved. The "New South

Market Development Strategy Briefing" can be seen that the current state of Lao's foreign relations has always been a relationship that tends to be regional and geopolitical.

The destiny of the country has always been tied to surrounding countries such as China, Vietnam, Cambodia, Thailand, and Myanmar. Although Laos is rich in resources,

The population is too small and the market has limited potential and faces potential pressure from inflation. However, the development potential and regional economic impact of Laos

Responsiveness, my country will focus on the development of manufacturing policy needs, as one of the key markets for Laos' new southward market expansion.

It is currently known that Director Qiu Yawen of the Global Health and Development Program has long participated in the Asia-Pacific Public Health Academic Alliance ( APAC

The Taiwan regional director of this alliance has established a deep and friendly relationship with the important officials of the alliance.

Dean of the Department and Chairman of the Asia-Pacific Public Health Academic Alliance Dr. Masamine Jimba Its assistant professor Dr. Akira Shibamura ,

The two have long-term and intensively cultivated in Laos and Myanmar to carry out academic research projects, and the epidemic prevention system in Laos and local infectious disease

Should be able to provide effective assistance, bilateral cooperation in academic exchanges, if it can promote the future needs of the plan, consider

This is the object of further contact.

### ( C ) Philippines

#### 1. Overall political and economic environment

Republic of the Philippines ( Republic of the Philippines) Located in the south of our country, shared by the whole country 7,107 Consisting of islands, land

Total land area 299,764 Square kilometers divided into Luzon from north to south ( Luzon ) , Wei Shi Ye ( Visayas ) And Mindanao

( Mindanao ) The three major islands. Its northernmost island is only from the southern tip of Taiwan 52.8 Kilometers, the nearest neighbor to our country; the Philippines

The country is close to the equator and has a maritime tropical climate. The year is roughly divided into dry and wet seasons. The rainy season is often flooded, causing traffic jams and

And suspension of work; according to the Philippine National Bureau of Statistics, the population of the Philippines has reached 2015 year 8 Month has

passed 1 Billion. The ethnicity is basically Malay, plus Chinese, Spanish, American and Indian who immigrated, as well as a mixture of Malays and the above-mentioned immigrants.

It forms today's multi-ethnic society in the Philippines, with English as the official language of instruction. At present, the economic scale of the Philippines ranks first in the world 39

Bit, 2015 The gross domestic product (international exchange rate) in the year is 2,924.51 One of the emerging industrial countries and the world's emerging

markets. The capital Manila is the twenty four Large purchasing power cities. The legal currency of the Philippines is the Philippine peso

The production and economic structure of the company is dominated by agriculture and industry, with particular emphasis on food processing, textiles and clothing, and light industries

industry. The main exports of the Philippines include semiconductors, electronics, transportation equipment, garments, copper products, petroleum products, and coconut oil.

And fruit. The main trading partners are the United States, Japan, China, Singapore, South Korea, the Netherlands, Hong Kong, Germany, Taiwan and Thailand.

country. The average income per capita in the Philippines is approximately 1455 USD ( 2007 year ) country with a large gap between the rich and the poor.

The population is below the poverty line since 2010 After Aquino took office as President in 1988, the political reforms were comprehensive, the economy gradually improved, and the

A large amount of capital investment, 2014 The annual economic growth rate is as high as 6.1% , And the demographic dividend is extremely high, the

average population age is only twenty three Years old, more than 3,000 10,000 middle-class people, praised by experts as still 35 A country that flourished in the year, and the Philippi



2010 Proposed in " National Health Budget " Per capita in the Philippines 280 Billion, about 5.97 Billion dollars, about 310 Peso (approximately 7 USD) . The competition between generic drugs and brand-name drugs in the Philippines is fierce due to the high prices in the Philippines Ang, even the national medical system 81 % Coverage.

(2) Prevalent diseases:

A. Infectious diseases:

Eight out of ten deaths and diseases in the Philippines are due to infectious diseases. Diseases involving the respiratory system Diseases such as acute respiratory infection, pneumonia, and bronchitis are the top three main causes, as shown in Table 3.

Table three 2010 Philippines 10 Major Causes of Death

**TABLE 10.TOP TEN CAUSES OF MORBIDITY, PHILIPPINES, 2010**

Rank	Disease	Number	Rate per 100,000 population
1	Acute Respiratory Infection	1,095,328	1203.0
2	ALRTI and Pneumonia	557,786	612.6
3	Bronchitis/Bronchiolitis	346,627	380.7
4	Hypertension	333,497	366.3
5	Acute Watery Diarrhea	322,799	354.5
6	Influenza	271,011	297.7
7	Urinary Tract Infection	82,867	91.0
8	TB Respiratory	73,614	80.9
9	Accidents	50,004	54.9
10	Injuries	35,396	38.9

Source: Field Health Services Information System, DOH

They are committed to controlling tuberculosis to reflect the Millennium Development Goals ( MillenniumDevelopment Goals (MDGs)) , Although the Department of Health ( DOH ) Active campaigns have been carried out in cooperation with donor agencies. Tuberculosis is still the One of the main reasons for the death rate, and AIDS control is also one of the country's commitments to the Millennium Development Goals. Although AIDS The prevalence of disease in the Philippines is lower than 1% , But the number of HIV cases is increasing exponentially. Endemic diseases such as malaria, blood Flukeworms and filariasis are still widespread in several regions, and the country has also experienced recurrence of infectious diseases, including New diseases caused by various populations and environments.

B. Non-communicable diseases:

Non-communicable diseases in the Philippines are on the rise. 2009 In 2017, seven out of ten causes of death were caused by non-transmitted causes Infectious diseases. The majority of deaths from non-communicable diseases (ie cardiovascular disease, cancer, chronic obstructive pulmonary disease and diabetes) ,Such as TABLE 11 Shown is considered to be related to lifestyle, approximately 75 % Of deaths can be attributed to noncommunicable diseases similar to estimates in most developing countries, 30-50 % Occurs before maturity ( 60 Under the age of), worth Note that the country's overnutrition is increasing but undernutrition is still a problem, especially in rural and poor areas. table



Fourth, provide further death data by sex.

Table four 2008 Analysis of Causes of Death of Men and Women in the Philippines

**TABLE 11. DISTRIBUTION OF DEATHS BY CAUSE AND BY GENDER, 2008**

Disease classification	Total		Male		Female	
	Number	%	Number	%	Number	%
Infectious diseases	81,821	17.73	46,465	17.29	35,356	18.34
Maternal and child health related	14,296	3.10	7,537	2.80	6,759	3.51
Ill-defined	16,010	3.47	8,048	2.99	7,962	4.13
Non-infectious in nature	349,454	75.70	206,714	76.92	142,740	74.02
CVDs	152,964	43.77	86,042	41.62	66,922	46.88
Cancer	49,047	14.04	25,341	12.26	23,706	16.61
Accidents and injuries	35,522	10.17	28,915	13.99	6,607	4.63
Diabetes	22,778	6.52	11,034	5.34	11,744	8.23
Chronic lower respiratory diseases	21,870	6.26	15,188	7.35	6,682	4.68
Chronic liver diseases and cirrhosis	6,774	1.94	5,293	2.56	1,481	1.04
Malnutrition	2,453	0.70	1,094	0.53	1,359	0.95
Mental disorder	762	0.22	579	0.28	183	0.13
Other diseases that cannot be classified as infectious	57,284	16.39	33,228	16.07	24,056	16.85

Source: PIDS Study on NCDs, 2011, Source of data: NSO 2008

Disease vulnerability factors related to lifestyle are now also widespread in the country. Now about 5 % Of people are

Considered obese, 10 % Were diagnosed with hypercholesterolemia and twenty four % Is considered high blood pressure. And, most and

These lifestyle-related diseases have common risk factors (ie unhealthy diet, smoking, sedentary lifestyle and

Alcohol consumption). Over the years, the increase in non-communicable diseases involves the consumption of some foods (i.e. saturated oil, sugar and fast food).

And reduce the consumption of complex carbohydrates such as roots and vegetables. Tobacco use is considered a major non-communicable disease,

For example, one of the common risk factors for cardiovascular, certain cancers and diabetes. Smoking is also a slower cause of obstructive pulmonary disease and asthma.

Strong risk factors for sex. Recent use 2008 year NNS In the study of data, close to 31 % Of the adult population are current smokers, in the past 14 %

Of people use tobacco. versus 2009 year " General Agreement on Trade in Services " In comparison, the prevalence is almost close to 28.3 %. The

prevalence of smoking is significantly higher among the poor. Alcohol and varying degrees of cancer, cardiovascular disease, liver

There is a causal relationship between disease and pancreatitis. 2008 In 2015, about a quarter of the adult population in the country were alcohol

drinkers. 2009 Another study in 2009 showed that almost half of alcohol drinkers are adults ( Department of Health , 2009 )

### 3. Description of bilateral relations

According to investigations, the university has no record of signing a memorandum of cooperation with relevant academic research institutions in the Philippines. The new South

Information platform and the Republic of China Foreign Trade Development Association (referred to as the Foreign Trade Association or the Trade Association) "New South Market Ex

The Philippines is one of the key countries of the new southward policy. 2017 year 11 month 1 Filipino nationals come to Taiwan on a trial basis 14 Days

visa-free up to 2018 year 7 month 31 End of the day. The plan is for the actual implementation of the Philippines' epidemic prevention system and local

There is currently no platform or channel available for contacting the needs of infectious disease prevention and treatment.

( Four) Vietnam

#### 1. Overall political and economic environment

The Socialist Republic of Vietnam, commonly known as Vietnam, is a Southeast Asian country located at the eastern end of the Indo-China Peninsula. The socialist country connecting Cambodia and Laos has more than 9,500 Million population (the world's 14 Name), it is expected to exceed 100 million in recent years. The capital is Hanoi and the largest city is Ho Chi Minh City. Vietnam is the Association of Southeast Asian Nations, World Trade Organization, Asia Pacific Member of the Foreign Economic Cooperation Organization and the French-speaking international organization, is the future 11 One of the countries (future 11 NEXT Eleven Is Goldman Sachs 2005 year 12 month 12 In the report released on Japan, it mentioned that there are bright development prospects 11 Countries, and similar concepts include the BRIC countries). However, the country is still facing problems in the gap between the rich and the poor, health care, and gender equality. There are also The country criticized its human rights situation, and the territorial dispute with neighboring China has once again emerged. According to "United Daily News" 5 month twenty four Daily report, Vietnam is in 1986 Actively carried out economic reforms in · announced the opening of investment, which drove the rapid development of the first wave 2007 Joined the World Trade Organization in 2016 and accelerated economic and trade activities with the international community, making it an economic growth in Southeast Asia. One of the fastest-growing countries, the economy continues to grow, but the local medical environment has not improved simultaneously. This is a concern of the Vietnamese government. The question is reflected in the financial aspect of the annual increase in medical expenditure. The overall medical expenditure is 2008 Year 54 One hundred million U.S. dollars, 2013 Has grown to 106 Billion US dollars, the average medical expenditure per person is from 2008 Year 62 The dollar has doubled to 2013 Year 115 Dollar.

#### 2. Overall health

(1) Overview of medical expenditure:

According to data from the World Health Organization's Global Health Observatory ( 2015 ),Total population: 93,448,000 People, Vietnamese The life expectancy of men is 71 Years old, female 81 year old. 15 To 60 The mortality rate of adults at 1000 People have 185 people, Women per 1000 Thousand people have 68 people. 2014 In year, the total annual health and medical expenditure is purchasing power parity ( PPP ) 390 USD Per person. The total expenditure on health accounts for approximately GDP ( GDP )of 7.1 %.

Vietnam 1986 In the process of economic restructuring that began in 2000, the Ministry of Health Compared with the industrial sector, the door is severely crowded out. The government uses the so-called user-paid principle to almost The financial responsibilities promised by the government are all left to the individual to handle. The government only targets particularly poor areas, individuals and Minorities, etc., carry out limited relief.

So from 1970 Since the end of the decade, Vietnam's private medical and health expenditures are self-payers 90 %. The self-pay rate dropped slightly after the implementation of certain medical insurance plans, but the number of people covered by the insurance is still limited. Among the self-paid medical expenses 70 % Is used to buy medicines. In general, the medical and health About a quarter of the total expenditure on medicines is medicine.

Vietnam's Millennium Development Goals related to health promotion ( MDG )In progress. Millennium Development Goals 4 already

Achieved the under-five mortality rate from 1990 Year 56 %, Fall to 2013 Year twenty four %. However, progress is still uneven of, 2012 Health insurance was fully popularized in 2016, but the health crisis of impoverished ethnic minorities and people in difficulties still persists. Continue to exist, for example, in this group, 62 The maternal mortality rate over age is the national average 5 Times, the One-year mortality rate is higher 4 Times. 2017 In 2009, the population of Vietnam will reach the aging stage, and the elderly ( 65 Years old and above Up to the total population 10 % Above), rapid urbanization also faces health challenges through the creation of new health policies.

(2) Prevalent diseases:

A. Infectious diseases:

a. AIDS

As of now, Vietnam HIV The infected have 164,000 People, of whom AIDS patients have 37,000 Human Factors HIV/AIDS And the number of deaths is 45,000 people. Most of the transmission pipeline of AIDS in Vietnam comes from blood transfusion ( 47% ), Sexual behavior ( 38.7% ) Vertical infection with the mother, etc. Vietnam 3 Big HIV / AIDS The patient's province is Ho Chi Minh City, Hanoi and Taiyuan ( Thai Nguyen ) . In recent years, Vietnam has been committed to solving the domestic AIDS problem. Can only be 2016-2020 Years of antiretroviral therapy provided 1000 Billion VND (approximately 3039 Ten thousand yuan), but the actual treatment requires about 6000 A budget of VND billion can be implemented.

Most AIDS patients in Vietnam are unable to accept high-priced ARV Treatment and other opportunistic Infection drugs. Therefore, this issue has aroused discussions between the Vietnamese government and various agencies to discuss the implementation of the Solve the use through medical insurance ARV Decisions on the issue of patient expenditure for therapy. However, there are only 40% Of AIDS patients enjoy social medical insurance. In addition, only 18.7% Of medical service centers accept insurance deductions The patient's expense business. The implementation of this decision will help a large number of AIDS patients receive medical services.

Vietnam has been committed to 2030 Completed the "Zero AIDS" Campaign ( Zero to HIV/AIDS) Goal, the country is currently actively establishing a flexible payment mechanism to ensure 2018 All insured AIDS patients can Enough to join medical insurance. And related people also said to 2018 The medical insurance fund will fully cover AIDS patients' Medical expenses and bear 90% Of patients accept ARV The cost of treatment. Vietnam actively seeks solutions to complete the "Zero Love The global goals of "new infection cases", "zero discrimination" and "zero deaths from AIDS".

b. tuberculosis

Vietnam is the world twenty two One of the countries with many cases of tuberculosis, about 18 Million people are infected, of which 2 Ten thousand people died, even higher than the death toll from traffic accidents. Statistics show that farmers are mainly infected with tuberculosis, accounting for 76% , The main reason Because of poor living and sanitary conditions in rural areas, the number of people receiving comprehensive treatment is quite limited. Central Farmers' Association has been es Early detection of tuberculosis among the people and the mutual assistance model of farmers, strengthen the advocacy work to raise farmers' awareness of tuberculosis.

c. malaria

The risk area is concentrated in the altitude of the central Xiyuan Plateau 1500 Areas below meters, such as Dak Lak Province ( Dak Lak) Denon (Dak Nong) Gia Lai Province ( Gia Lai) , Kon Tum Province ( Kon Tum) , Binh Phuoc ( Binh Phuoc) , Some provinces close to the sea

There is a risk of infection in the west, such as Khanh Hoa province ( Khanh Hoa ) , Ninh Thuan Province ( Ninh Thuan ) , Quang Nam Province ( Quang Nam ) , Quangzhi Province ( Quang Tri ) . Metropolitan area, Red River Delta, Mekong Delta ( Mekong Delta) And Nha Trang ( Nha Trang)

There is no risk of infection in the coastal areas to the north.

#### d. dengue

The epidemic situation in Vietnam continues to rise. The current dengue fever epidemic mainly occurs in southern provinces and cities, with the largest number of cases. Due to the abnormal weather, dengue vector mosquitoes breed in large numbers, and the people's poor concept of epidemic prevention is the cause of the epidemic. More. The Southern Health Department stated that in the future it will strengthen epidemic prevention and publicity efforts, including imposing penalties on people who do not cooperate.

**Measures.**

#### B. Non-communicable diseases:

Carry out relevant preventive and health care plans for important domestic diseases, such as chronic diseases such as hypertension and diabetes, to promote. Intensify people's understanding of diseases, and continue to strengthen public health education information, and strengthen the prevention of related diseases and post-illness. Concepts such as effective control and mitigation of deterioration. Vietnamese eating habits and cooking methods such as traditional seasoning methods and the usual consumption of Food, barbecue cooking methods, coupled with the habits of drinking, smoking, etc., the population of the local population suffering from three highs has increased rapidly, especially. It is that cardiovascular diseases and diabetes are becoming more serious. According to the Vietnam National Heart Association, BachMai Hospital and Hanoi Medicine. A study by the university pointed out that the prevalence of hypertension is lower than 2012 Years Gundam 25.1% , Diabetic patients are growing rapidly, and the overall prevalence rate is reduced by 2011 Year 2.9% Climb to 2014 Year 5.3% , The government began to pay attention to the public health problems derived from chronic diseases such as hypertension and diabetes, and carried out national prevention plans, such as cardiovascular disease prevention and control plans, the. Promote advocacy and formulation of policies for chronic disease management in order to effectively control the prevalence of chronic diseases and achieve effective disease management. Control also boosts the demand for business opportunities related to home medical equipment.

With the increase in the disposable income of the Vietnamese people, it has created a rapid rise in the size of the middle-class population, which has also driven changes in consumption. Change, pay more attention to personal health, and gradually shift to product quality. According to the city survey company TNS Investigate Hanoi and Ho Chi Minh. The consumption characteristics of Ming City found that there are more than 80% The respondents said that they are increasingly worried about health 90% Tend to buy higher quality products.

The prevalence of chronic diseases such as high blood pressure and diabetes is increasing rapidly. Due to the limited energy of local manufacturers, relevant medical materials. The product relies on imports. Take blood pressure monitors as an example. If the product quality and specifications are high in the same configuration, price is the secondary consideration. Spread over 20 Wanyuedong (approximately 60 Yuan Renminbi) will affect purchase options.

## 越南衛生部 (Ministry of Health, MOH) 組織架構

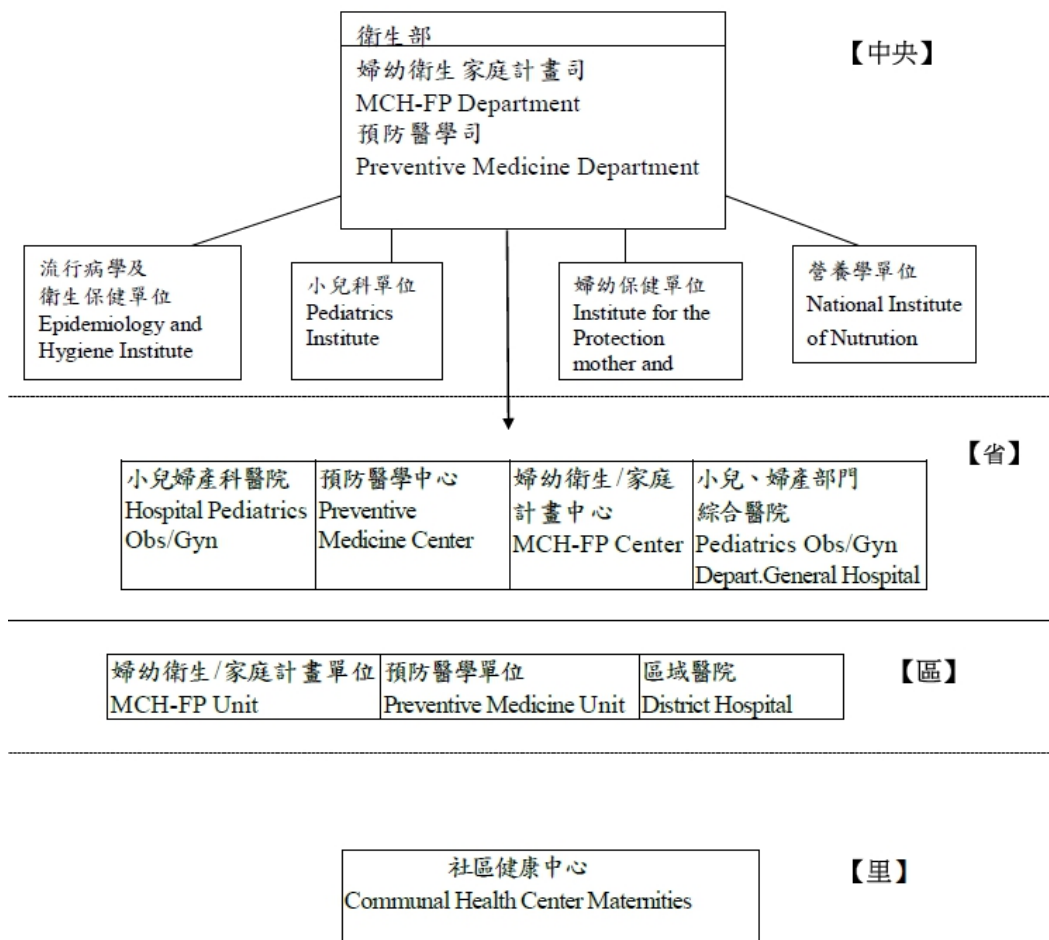


Figure 2. Organizational Chart of the Ministry of Health of Vietnam

### 3. Description of bilateral relations

It has been checked that our school has a record of signing a memorandum of cooperation with relevant academic research institutions in Vietnam. 2015 Years and Hu

Zhiming Medical University ( University of Medicine and Pharmacy, Ho Chi Minh City) Haiphong Medical University

(Haiphong University of Medicine and Pharmacy, (HUMP)) , Hanoi Pharmaceutical University ( Hanoi University of Pharmacy (HUP)) And Hanoi Medical

University ( Hanoi Medical University) , Sign the school-level and college-level MoU For double

Border research and academic exchanges have established friendly and cooperative relations, and the new southward policy information platform of the Ministry of Foreign Affairs and

Development Association (referred to as the Foreign Trade Association or the Trade Association) "New Spill and Market Expansion Strategy Building" policy

one. The school also combines with private organizations (Taiwan-Vietnam Exchange Association) to strengthen the link between the two parties. In addition, our hospital is also this y

Day~ twenty one In order to assist the Department of Disease Control in planning the preliminary negotiations for the planning of the epidemic prevention and colonization center, Guo

Also the host of this project, went to Vietnam to meet the director of Quang Ninh Province Health Department Dr. Vu Xuan Dien , And invited Quang Ninh Provincial Health Department

Director and Director of the CDC Dr. Ninh Van Chu With the Dean of Tuberculosis and Thoracic Hospital Dr. Phan Vu Duc ,in 10 month 4 day

~7 In addition to academic exchanges in Taiwan, we also arrange visits to the Department of Disease Control and rapid screening or vaccine laboratories for participation

Visit and finally 11 month 19 Director Qiu Yawen, Director Qiu Hongyi and Assistant Professor Huang Liling of the Japanese Academy also visited and

visited important institutions such as Quang Ninh Province and Hanoi; it is not only the exchange of talents, but also the cooperation in industry, which shows that the school and the V

The university and the government actively establish a stable bilateral academic research and exchange cooperation relationship, and implement the actual implementation of the futur

The strategic evaluation and development of the side cooperation model will be quite helpful.

## ( 5) Indonesia

### 1. Overall political and economic environment

Indonesia is the world's largest archipelago country, composed of five major islands (Java, Sumatra, Kalimantan, Sulawesi and Bab

Asia) and 30 island groups, a total of 17,508 Islands, large and small, known as the "Island Country", with a total area of

1,919,443 Square kilometers (the area of Taiwan 53 Times). The Indonesian islands are distributed in northern latitudes 6 Degrees, south latitude 11 Degrees, east longitude 95

Degree to 141 Between degrees, the equator runs through the whole territory, east and west reach 5,150 Kilometers, North and South 1,930 Kilometers, it

is the bridge between the Asian continent and Oceania, the key point of the Pacific and the Indian Ocean, and it occupies an important position in global strategy. Natural resources in

Minerals such as natural gas, wood, rubber, palm oil, coal, iron, brass and tin. The population of Indonesia is approximately 2 Billion 5 thousand 5 Million

people ( 2015 Year); the main race in the territory is the Javanese 45% , Chinese accounted for about 5% ,approximately 1,200 More than 10,000 people;

Indonesia's official language is Indonesian; Indonesia is independent of 1945 year 8 month 17 Day, nationwide 34 Provinces (including Aceh, Yogyakarta,

etc. 2 A special administrative region and the Capital Region of Greater Jakarta), Indonesia is a presidential country.

### 2. Overall health

Indonesia has not yet fully achieved its Millennium Development Goals ( MDGs) , Especially the target 4( Reduce child mortality) and goals

5( Improve maternal health). Emerging infectious diseases and re-emerging infectious diseases are putting tremendous pressure on the health system, so it is still necessary to make

Efforts to quickly respond to urgent needs and strengthen effective disease development control programs, including zoonotic diseases. People have

It is realized that while emphasizing the improvement of services, attention must still be paid to ensuring that women, children and young people can be provided with high-quality and

And comprehensive health services. Nutrition is the key common factor of mortality and morbidity. In Indonesia, it is still an important public

Public health issues; further problems arise due to insufficient food safety and quality. Public health risks caused by tobacco,

Unhealthy diet, lack of physical activity, unsafe drinking water, poor sanitation, traffic jams and the use of solid fuels for cooking

Cooking; further requires comprehensive health promotion and the needs of a healthy environment. Need to strengthen the promotion of the relationship between climate change and

Contact, the health sector needs to be fully prepared to mitigate and adapt to the impact of climate change. In response to the tsunami and its follow-up

Based on the earthquake experience, it is also important to develop national emergency preparedness and response to public health needs.

In the past two decades, the international community has shown sustained interest in the healthy development of Indonesia. The two largest bilateral funding

The provider is the United States Agency for International Development ( USAID) And the Australian Agency for International Development ( AusAID) , They account for nearly a third

two. from 2003 Since the beginning of the year, the Global Fund to Fight AIDS, Tuberculosis and Malaria ( GFATM ) And the Global Alliance for Vaccines and Immunization

( GAVI ) Start to allocate funds for special projects. Indonesia since 2012 The co-financing status of the Immunization Alliance has ended since guard

The Health Organization has played a leading role in assisting the Ministry of Health in preparing the Global Fund's Global Fund project proposals. Who also passed

Through active participation in national cooperation mechanisms and through "Intensified support and action" Program, through the use of Global Fund

Jin, to provide technical support for tuberculosis and AIDS programs and assist the Ministry of Health "Making the money work" WHO supports technical

assistance. In addition, there are currently 25 United Nations agencies, funds and programmes. ( WHOCountry Cooperation

## Strategy Indonesia 2014-2019)

### (1) Infectious disease overview

#### A. AIDS

The prevalence of HIV/AIDS varies from 2001 Every year 10 Among ten thousand 39 People rise to 2012 Year 245 people( WHO , 2014 ), in

Papua Province and among high-risk groups, the HIV/AIDS infection rate is particularly high. 2016

Years, Indonesia has 4.8 Ten thousand ( 43000-52000 ) New HIV infections and 38000 ( 34000-43000 ) And love

The number of AIDS-related deaths. 2016 Every year 62 Million ( 53 Million 73 Million) people are infected with HIV, of which 13 % ( 11

%- 15 %) are receiving antiretroviral therapy. Among pregnant women infected with HIV, 14 % ( 12 %- 16 %)positive

While receiving treatment or preventing the spread of HIV to their children. Estimated to have 3200 ( 2500-4000 ) Children due to mother-to-child transmission

Sown and newly infected with HIV ( WHO Country Cooperation Strategy Indonesia 2014-2019; UNAIDS) .

#### B. tuberculosis

In the past two decades, significant progress has been made in the discovery and treatment of tuberculosis. The incidence of tuberculosis has increased from 2000

Year 474 People fall to 2013 Year 272 People, the incidence rate from 20 %up to 72 %. However, because every 10

Among ten thousand 25 Deaths from tuberculosis, estimated 2013 About 6.4 Ten thousand people died of tuberculosis ( WHO , 2014 ) ,

Became the second leading cause of premature death ( Institute for Health Metrics and Evaluation , 2013 ) And multi-drug resistance

Sexual tuberculosis is a growing threat. World Health Organization ( WHO ) Designate Indonesia as tuberculosis " High burden

country " . All over the world twenty two High-burden countries, which together account for the world's 80 %about. Foreigners who spend a lot of time in

high-burden countries or people who travel frequently may benefit from tuberculosis screening. Some countries may build

It is recommended that infants and children receive BCG vaccination. The annual risk of tuberculosis infection in Southeast Asia is 1-2.5 %,Upward trend. In print

Dunesia, there are about 50 Ten thousand new cases of tuberculosis and 17.5 10,000 deaths. ( WHO Country

## Cooperation Strategy Indonesia 2014-2019)

#### C. malaria

although 39 % Of the population lives in malaria-free areas of the country, mostly in Bali and Java provinces, but as high as 17 %of

The region is in a high transmission area, especially the eastern provinces of Papua, Maluku, Sulawesi and Nusa Tenggara, 44

% Is in the low transmission area ( World Health Organization , 2013 ) . Has expanded interventions, prevention and treatment

Treat malaria and strengthen malaria surveillance. The goal is to 2030 Eliminate malaria in the year. ( WHOCountry Cooperation Strategy Indonesia

2014-2019)

### 3. Description of bilateral relations

It has been checked that our school has a record of signing a memorandum of cooperation with relevant academic research institutions in Indonesia, such as our school 2009 / 2010 with the University of Yogyakarta ( Universitas GadjahMada , UGM) And Hassanuddin University ( Hasanuddin University) Wait near 54 So School, sign the school-level and college-level MoU And this year 2 Tsukimoto School 8 A college representative and colleagues from the International Office went to Indonesia for enrollment and visit activities. In addition, the new southward policy information platform of the Ministry of Foreign Affairs and the Republic of China Foreign Trade (Or Trade Association) "New Southbound Market Development Strategy" of the key countries of the new southward policy; Participate in the Asia-Pacific Public Health Academic Alliance ( APACPH) School of Public Health, University of Indonesia Dr. Agustin Kusumayati Dean, also the current Indonesian TB Technical Working Group Chairman, equivalent to the Ministry of Health advisory board Chairman, built Establish a deep and friendly relationship, so 9 month 7 Day~ 9 Invited to host the International Forum on Building Asia-Pacific Health Promotion Core Capabilities on Japan Dr. Agustin Kusumayati The dean came to Taiwan to participate and give lectures and participate in the talks. Finally, the dean of the hospital Guo Naiwen and C Appoint personnel at 11 month 29 Visited the President of Amaata University in Indonesia Dr. Hadi , And visited local officials and experts to promote cooperation in epidemic prevention. The plan is for the actual implementation of Indonesia's epidemic prevention system and local infectious disease prevention and control needs, There are currently available platforms and channels.

#### ( 6) Going abroad plan

The project team is to collect the epidemic prevention strategies of the United States, Southeast Asian countries or countries with diplomatic relations, and seek international cooperation Opportunity to strengthen and GHSA and JEE The exchange of experts, the formulation of plans for going abroad, and the detailed reports on going abroad are shown in Table 5 and Table 6. Material shown.

The implementation status is as follows:

1. United States: The United States is expected to make three trips abroad. Associate Professor Cai Fengzhen, co-host 4 Visited in the month and ended 6 month

Visiting the United States again, the host of the project, Professor Naiwen Guo 7 Three visits in the month, reaching the original plan

Secondary goals.

2. Indonesia: The plan to go abroad Indonesia is expected to have six visits. The host of the project is Professor Guo Naiwen, the co-host Director Chen Zaijin and Chen

Guanwen Assistant at 11 At the end of the month, we visited Yogyakarta, Ama Ata University and other units in Indonesia to promote cooperation in epidemic prevention.

The cooperation and contact platform for the establishment of epidemic prevention technology transfer centers will be developed for bilateral academic research cooperation.

Degree, dispatch personnel to visit according to the situation.

3. Bangkok, Thailand: Bangkok, Thailand is expected to make one visit. Co-host Professor Qiu Yawen has already 5 Month trip. Co-host Cai

Associate Professor Fengzhen 7 There were two visits in the month, reaching the original goal of going abroad.

4. Chiang Mai, Thailand: Four visits are expected in Chiang Mai, Thailand. The project host Professor Guo Naiwen, co-host Professor Qiu Yawen, Cai

Associate Professor Fengzhen and related staff of the seminar (Assistant Lin Kaishun, Assistant Xu Chunjia) 8 Go to Thailand

Mai held TEPHINET Preconference workshop , A total of five people, reaching the original planned number of people

standard.



5. Vietnam: Vietnam is expected to visit six visits. The host of the project, Professor Guo Naiwen, has already 8 Visited the Department of Health of Quang Ninh Province, Vietnam

Preliminary consensus, follow-up is the co-host Professor Qiu Yawen, Professor Qiu Hongyi, Assistant Professor Huang Liling and Vietnam

Postdoctoral researcher, Yu 11 In the middle of the month, we visited the Department of Health of Quang Ninh Province, Vietnam, to contact follow-up cooperation matter

At the operational level, a total of five person-times will be established for bilateral academic research cooperation and the implementation of this plan to establish epidemic

The progress of the cooperation and contact platform will be dispatched according to the situation.

6. Malaysia: Malaysia is expected to visit two times. Associate Professor Cai Fengzhen, the co-host of the project, has already 11 Visit Malaysia

Ya, visit relevant units and experts, and dispatch personnel to visit as appropriate.

Table 5. Total number of visits and implementation results

日期	出訪人員與國家	預期效益	實際成果效益評估
2017.04.05~12	Teacher Cai Fengzhen visited United States	Participate in the Alliance of Global Health Universities ( CUGH) seminar And visit the George Washington University School of Public Health Rebecca Katz Professor wait, just GHSA with JEE Topics, discuss collaborative research with these experts.	In addition to gains from global health education and research this time, we also collaborated with global health experts Conduct in-depth discussions and exchange of opinions, and Rebecca Katz Professor GHSA with JEE Discussion of topics for collaborative research. This benefit assessment is the part of global health education and research (including Global health security research related to the prevention and control of infectious diseases), conduct in-depth research with In addition to discussion and exchange of opinions, the implementation of the global health and safety plan has also been On the whole, if our country wants to keep up with global development, or even help shape this As it develops, our country must continue to participate in the annual meeting of the Global Health University Alliance. And join the discussion of relevant committees to participate in and help shape global health education And research and development.
2017.05.24~28	Director Qiu Yawen visits Thailand	Participate in APACPH Meeting and through the Mathieu University Dean of the School of Public Health Paryoon Fongsatitkul Professor, visit the competent authority of national defense GHSA&JEE Of experts and scholars, follow-up invited to Taiwan Visit.	Participate this time APACPH After the meeting, visit the Thai Ministry of Health and the World Health Team Odano Epidemiology Collaboration Center and know Dr. Teerasak Chuxnum And also The country is primarily responsible for the global health security agenda ( Global Health Security Agenda) And joint external evaluation ( Joint External Evaluation) Contacts, and Completed the invitation to the Thai Disease Control Agency ( Department of Disease Control, Ministry of Public Health) Deputy Director Dr. Tanarak Plipat And subordinates Ms. Kiratikarn Kladsawad Epidemiology Bureau of Thailand, IHR The resources of the capacity development team Shenzhen officials visited Taiwan and gave speeches. The benefit evaluation is to connect officials of the Thai CDC and establish bilateral contacts to benefit Come to pave the way for invitations, seminars or deepening cooperation.

日期	出訪人員與國家	預期效益	實際成果效益評估
2017.06.26~07.03	Teacher Cai Fengzhen paid a visit United States	Participate in the 3rd Global Biodiversity Summit, and a visit Next Gen principal Dr. Jamechia Hoyle on GHSA with JEE Discuss topics and take this Collaborate and discuss with more experts.	This time through the recommendation of Associate Professor Guo Xusong  The sessions related to the prevention and control of infectious diseases at the Global Biodiversity Summit, including the  After the study and exchange, also participate John Hopkins Health Security center Held by " What is needed now to prepare for major health  emergencies "Meeting to understand the public health system and promote JEE The importance of the system  Sex; not encountered during the journey Dr. Jamechia Hoyle , But stop by  Dr. Lu Daoyang, a health representative from the United States, exchanged opinions and visited Rebecca  Katz Professor, in-depth discussion IHR versus JEE Comparative study on the effectiveness of different evaluation modes.  This benefit evaluation is based on participation in global infectious disease prevention and control related networks and  At the same time, discuss research cooperation matters with important scholars in the field, and also meet  Scholars in related fields, take this meeting to expand my country's visibility and gain a comprehensive understanding of t  Issues and mainstream practices in health issues are necessary.
2017.07.01~16	Dean Guo Naiwen visits Hopkins United States	call Johns Hopkins School of Public Health and Johns Hopkins Center for Health Security , Just prevent Epidemic cooperation, talent cultivation, GHSA with JEE Wait for discussion Discuss on the topic.	Visit and our country CDC Close cooperation Johns Hopkins Center for Health Security , Ask him about our country CDC Of JEE The areas that can be improved in my country in the  report to facilitate the establishment of the follow-up strategic planning roadmap; the last visit Johns  Hopkins Senior Academic Associate Dean of School of Public Health Prof. Laura Morlock , Dean of Epidemiology  Prof. David Celentano , Director of Health Finance Center Prof. GerardAnderson Et al., plan for future cooperation in epidemic prevention and talent cultivation between the two schools.  This benefit evaluation is for our school and Penn State University, Johns Hopkins Big  Schools have a close cooperative relationship, through MoU Way to exchange bilateral talents,  Educational training and research projects can also be achieved through the cooperation of the research centers of both

日期	出訪人員與國家	預期效益	實際成果效益評估
			Promotion of health and safety issues.
2017.07.09~08.10	Teacher Cai Fengzhen visited Thailand	Will go to Mahidou University in Thailand as a short-term guest teacher to teach, and during the guest period, first preparation, planning and invite TEPHINET Talk before the International Symposium And act as the host of the meeting.	<p>This time TEPHINET Invited to the former Thailand before the international seminar IHR Focal Point , Now a lecturer at Hido University Ajchara Vararuk Professor and Thai CDC responsibility IHR and JEE Official and veterinarian of the Epidemiology Bureau, Ministry of Health, Thailand Dr. Teerasa Chuxnum Served as the host of two sessions. Overall, this time TEPHINET</p> <p>The pre-conference workshop went smoothly and successfully. Not only was there a large number of participants, but also</p> <p>Going smoothly and enthusiastically. Another afternoon by AjcharaVararuk Under the arrangement of the professor, Let, Professor Guo Xusong, Deputy Director of my country's Disease Control Agency Luo Yijun and Ambassador without As well as the Beiye team and the former and deputy director of the local disease control agency in Chiang Mai, Thailand of Disease Prevention &amp; control, Department of Disease Prevention &amp; control, Ministry of Public Health, Thailand ) Piyada Kunawararak Ph.D. and current officials of the Department of Disease Control Thitipong</p> <p>Yingyong Physicians discuss the establishment of cooperation bases between my country and Southeast Asian countries</p> <p>Discuss the prevention and treatment of disease and dengue fever.</p> <p>This benefit evaluation is to increase the school's development in the field of global health and health safety</p> <p>Visibility, so that the international community can understand and understand the global health and</p> <p>In addition to the development and prospects in the field of health security, it is also related to the global health security fi</p> <p>People have more close contacts and exchanges.</p>
2017.08.04~09	Dean Guo Naiwen and Qiu will go to Chiang Mai TEPHINET The international seminar is as scheduled 8 month 6 On the morning of the day, the first international forum was held to implement the CDC's "Epidemic Prevention Cooperation Opportunity and Director Ce Yawen, Lin Kaizhi, and Evaluation of Countries and Strategies" through the pre-conference workshop. 14 Country (respectively with Assistant Shun and Xu Chunja who will share our country JEE versus FETP Experience, and then Taiwan, China, India, Indonesia, Malaysia, Mozambique, Myanmar, Nano Assistant to visit Thailand	Share with other countries in the public health work in my country	(Bia, Philippines, Luanda, Pakistan, Thailand, Isopia, Uganda)

日期	出訪人員與國家	預期效益	實際成果效益評估
		<p>Efforts to increase the visibility of international participation; FETP ,</p> <p>went to Bangkok to meet with my country's representative office in Thailand and Ma Xi was very enthusiastic to participate in the discussion, raise questions, and give feedback; in the afternoon</p> <p>Dou University conducts future cooperation in epidemic prevention, industry chain and former Chiang Mai and deputy director of the local disease control agency ( Office of Disease Prevention</p> <p>Discussion of talent cultivation.</p>	<p>Epidemiology-related professionals and officials, a total of 33 Participants attended, and all the trainees</p> <p>&amp; control, Department of Disease Prevention &amp; control, Ministry of Public Health, Thailand ) Piyada Kunawararak PhD and current disease</p> <p>Officials from relevant units of the Control Department Thitipong Yingyong The doctor discussed the</p> <p>follow-up bilateral cooperation discussions with the new Southbound policy related plans. The next day I went to Bangkok</p> <p>Ambassador Tong Zhenyuan of the National Economic and Cultural Office, discussing feasible future cooperation directions</p> <p>On the other hand, we will also meet with the leader of the education group Lai Brigitte to provide cooperation and exchange</p> <p>In-depth recommendations. Finally, go to Mathidou University to complete the two campuses MoU Renewal, content</p> <p>There are scholars, student exchanges, and research projects.</p> <p>The benefit evaluation is as follows. First, the implementation of the CDC's "Epidemic Prevention Cooperation Agreement"</p> <p>The first international forum of the "Operational and Strategic Evaluation" project, showing</p> <p>The ability to respond on the spot to enhance international visibility; secondly, through this conference and the global</p> <p>More exchanges between officials, experts and students in the field of health and safety</p> <p>Capital; furthermore, visit our representative office in Thailand to discuss possible future cooperation directions,</p> <p>And seek to provide them with the current status of the Thai education system and suggestions, and develop ways to cult</p> <p>In the end, once again consolidate the cooperative relationship with Mathieu University in Thailand, looking forward to the</p> <p>With Thailand's top allied schools, there will be more teachers and</p> <p>Student exchange and other academic exchanges and cooperation.</p>
2017.08.19~21	President Guo Naiwen will go to Quang Ninh Province, Vietnam	to Quang Ninh Province, Vietnam to visit the Director of the Department of Health and the province. This visit to Quang Ninh Province, Vietnam, the most important thing is to meet three important level CDC And other units, the director of the Health Department of Hening Province, deepened the transfer of epidemic prevention technology Dr. Vu Xuan Dien Quang Ninh CDC director Dr.	

日期	出訪人員與國家	預期效益	實際成果效益評估
		<p>Make a plan and invite professors or government from Vietnam League schools</p> <p>The disease management officials give a speech or short-term</p> <p>Give lectures and establish a communication channel or platform for epidemic prevention.</p>	<p>Chu Ninh And the director of Quang Ninh Province Thoracic Hospital Dr. Vu Duc Phan , Main items</p> <p>As follows: discuss Vietnam TB Current status of prevention and control of dengue fever, and future cooperation with Taiwan epidemic prevention.</p> <p>Direction, and my country CDC Sign cooperation MoU The possibility of three Vietnamese</p> <p>Foreign guests 10 Itinerary to visit Taiwan at the beginning of the month, visit our school and the Department of Disease</p> <p>Cooperation matters concerning technical transfer.</p> <p>This benefit assessment is that Vietnam is the key country of our government's new southward policy.</p> <p>The cooperation and connection in Quang Ninh Province are very important, and with the love of this visit</p> <p>Fund collection and promotion of the new southward cultivation and colonization, which has been recognized by the coun</p> <p>It can be described as a big breakthrough.</p>
2017.11.11~15	Teacher Cai Fengzhen visited Malaysia	<p>Will participate APACPH Meeting and visit the University of Malaya</p> <p>Experts and scholars related to learning and planning, GHSA and Rampal Professor, understand the current status of infectious diseases in Malaysia and cooperation in the future</p> <p>JEE Establish substantive cooperation and exchanges on the topics, as well as the direction, and have a high willingness to cooperate with the country; also organized through the University of</p> <p>It is proposed to invite professors or government officials from the University of Malaya to have the opportunity of an Asian Health Awareness Seminar with Mahidol University in Thailand ( Ma</p> <p>The country GHSA or JEE Strengths (e.g. emergency response University) New Dean of the School of Public Health Chanuantong Tanasugarn teach</p> <p>Command center, inter-departmental rapid response) to my country's short-term</p> <p>Give lectures and establish a communication channel or platform for epidemic prevention.</p>	<p>The University of Malaya Wah-Yun Low Professor (Short-term guest teacher of our college</p> <p>Grant) referral, and invite the Malaysian Ministry of Health to implement GHSA Officials come to Taiwan to participate</p> <p>Experts from international forums and visits on this trip.</p> <p>First visit to the director of the Department of Social and Preventive Medicine of University of Malaysia Sanjay</p> <p>In addition to enhancing the foundation of cooperation between the two schools, it is also aimed at planning future events</p> <p>In-depth discussion.</p> <p>This benefit evaluation is the promotion of global health security and my country's new southward policy.</p> <p>Extremely dependent on the establishment and development of academic platforms, and APACPH It is to show our coun</p> <p>Actively establish cooperative relations with South-facing countries, as well as the school's international strength and influ</p>

日期	出訪人員與國家	預期效益	實際成果效益評估
			<p>Best to witness; this trip will not only increase the school's global health and health safety</p> <p>The visibility of the exhibition enables the international community to understand and learn about the global health</p> <p>Development and prospects in the field of health and safety, but also due to</p> <p>People have more close contacts and exchanges, and in the future our school will be in the field of global health and safety</p> <p>The research and development of the company has laid a deeper foundation.</p>
2017.11.19~24	<p>Director Qiu Yawen, Qiu</p> <p>Professor Hongyi, Huang Li</p> <p>Assistant Professor Ling and Yue</p> <p>Southern Postdoctoral Research</p> <p>Visits to Vietnam</p>	<p>The itinerary is divided into two regions:</p> <p>1. In Quang Ninh Province, he will visit the director of the Department of Health and the chief of epidemic prevention</p> <p>Management agencies and local medical institutions, GHSA , JEE</p> <p>and Roadmap And other issues, exchange opinions and</p> <p>Employ and study the possibility of cooperation.</p> <p>2. Go to Hanoi to visit top local universities and medical institutions</p> <p>And epidemic prevention experts, deepening cooperation on the transfer of epidemic prevention technology</p> <p>Plan, discuss the pre-work of the project cooperation.</p> <p>3. According to the situation, invite professors from Vietnam league schools or government disease management</p> <p>Officials give lectures or short-term lectures on the strengths of the country</p> <p>And establish an epidemic prevention contact channel or platform.</p>	<p>The visit to the director of Quang Ninh Province and the Department of Health in Vietnam Dr. Vu Xuan</p> <p>Dien Discuss with the team that the planned projects that will be implemented in the future will also be implemented in Q</p> <p>Both parties can sign MoU , Short-term education and training and entry points for epidemic prevention strategies, etc. Fo</p> <p>Go to Hanoi to visit relevant medical universities and Hanoi University of Public Health Vinmec</p> <p>International Hospital , Both strongly agree with the Taipei Medical University on the training program,</p> <p>Research, exchange, etc. for cooperation; and visit the central government CDC Official Dr. Vu Ngoc</p> <p>Long .</p> <p>The benefit evaluation is as follows. First of all, for the CDC's future cooperation issues,</p> <p>Quang Ninh Province does preparatory work, such as MoU , Talent training, technology transfer, etc.;</p> <p>The second is to cooperate with local health and medical institutions such as Quang Ninh Province and Hanoi City in Viet</p> <p>Make an agreement to study the transfer of disease prevention technology and training on behalf of the disease control a</p> <p>Also contacted the central officials of the Ministry of Health of Vietnam, suggesting TCDC Formal letter</p> <p>Contact the Ministry of Health of Vietnam and arrange for relevant departments to visit Taiwan to discuss cooperation on</p> <p>In the end, we conclude this trip, whether in academic cooperation, government connection, and new southward</p> <p>Regional networks have made concrete progress, and there will be more room for international cooperation in the future.</p>
2017.11.29~12.02	<p>Dean Guo Naiwen, Chen</p> <p>Re-promoted Director, Chen Guan</p>	<p>Will visit Ama Ata University ( Alma Ata Univ.) and</p> <p>Officials from the local health unit, and transfer</p>	<p>During the visit to Ama Ata University in Indonesia, the president of the school Dr. Hadi With the assistance of</p> <p>Dean Guo Naiwen and Director Chen Zaijin held a speech with officials of the local health department at the school</p>

日期	出訪人員與國家	預期效益	實際成果 效益評估		
	Assistant Wen visits Indonesia	<p>Cultivation and deep cultivation cooperation project, the pre-production of the project cooperation</p> <p>Discussion of the profession; according to the situation, the teacher of the Indonesian league school is invited</p> <p>The country's GHSA or JEE</p> <p>Strengths (such as the management of communicable diseases)</p> <p>Management strategies for rapid response and drug-resistant microorganisms)</p> <p>Speech or short-term lectures in my country and establish epidemic prevention contact management</p> <p>Road or platform.</p>	<p>Activities and roundtable discussion meetings to introduce Taiwan's current TB and Dengue Fever</p> <p>The current situation of epidemic prevention, and then brought it into the deep cultivation cooperation of epidemic prevention</p> <p>Visit itinerary, Director of the Department of Health, Central Java Province, Indonesia, Chairman of the Planning Development</p> <p>The director and the director of the community health center will be 12 month 19 Visits in Japan, in-depth exchanges; finally through Dr. Hadi The referral recognizes the officials of the Ministry of Education of the country</p> <p>Come to the promotion and cooperation of talent cultivation.</p> <p>This benefit assessment shows that Indonesia is also an important country in my country's new southward policy.</p> <p>Although some factors hindered the invitation to visit, through the recommendation of local academic institutions,</p> <p>Get in touch with the heads and senior managers of important local health and medical institutions.</p> <p>The health governance and epidemic prevention effectiveness of the country expressed a high willingness to exchange a</p> <p>Arrangements to inspect my country's tuberculosis and dengue fever prevention and control policies and measures, which</p> <p>Excellent results.</p>		
Expected performance of overseas projects: total twenty two Person times					
United States	Indonesia	Bangkok, Thailand	Chiang Mai, Thailand	Vietnam	Malaysia
3	6	1	4	6	2
Progress abroad: total twenty two Person times					
3	3	5	5	5	1



出國報告 (出國類別：國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

美國華盛頓全球衛生大學聯盟 (CUGH) seminar 研討會  
Washington Alliance of Global Health Universities (CUGH) seminar

服務機關：臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱：蔡奉真副教授  
Name and title: Associate Professor Cai Fengzhen

派出國家：美國華盛頓  
Country sent to: Washington, USA

出國期間：106 年 4 月 05 至 12 日  
Going abroad period: 106-year 4 month 05 to 12 day

報告日期：106 年 4 月 17 日  
Report date: 106-year 4 month 17 day

## Summary

I am going to Washington, USA this time DC Participated by the Global Health University Alliance ( Consortium of Universities for Global Health) Johns Hopkins University ( Johns Hopkins University) With McAllen University ( Makerere University)

Co-organized the 8th Global Health University Alliance International Conference ( 8th annual CUGH conference) , The theme of this conference is

Healthy people, healthy ecological environment ( Healthy People, Healthy Ecosystems) , This time the big accounting has come from all over the world

More than 1,000 scholars from China participated in thematic publications and discussions on global health-related topics. And my appointment this time

In addition to the development of the academic and educational fields of global health, exchange of opinions with experts from various countries

The practice is used as a reference for the intensive curriculum design and teaching of this course, as well as the positioning of the research field. It is also a reference to the school's p

The content of the project and the global health and safety agenda of the Global Health and Safety Program of the Department of Disease Control and Prevention undertaken by the S

(Global Health Security Agenda) For follow-up development matters, we will cooperate and discuss with relevant international scholars.

1. Purpose and Content:

(One) 4/6

In the satellite meeting part of the day before the conference ( pre-conference Satellite session ) , I participated in the Global Health Education Committee of the University Alliance ( CUGH Education Committee ) Related discussion sessions, the session is based on the global Emerging themes of health education ( Emerging Themes in Global Health Education ) As the topic for discussion.

The workshop is by Anvar Velji Chaired by the professor, by the sub-committee of the Education Related Committee of the Global Health University Alliance Report on the focus, work content and the progress and progress of the current discussion respectively, and group them in the second half Adopt round table discussion to discuss related topics.

In this workshop, there are two themes that I pay most attention to: one is to build this theme for the core competence of global health, and

The content that should be included in the educational content of the academic level of the master's degree, such as curriculum design, educational methods, shared educational The goal of the degree course, etc.

In the core competence building of global health, the education committee of the Global Health University Alliance After more than a year of research and discussion, the relevant report will be completed recently, and a toolkit of core capabilities in global health education will be provided ( CUGHGlobal Health Education Competencies Tool Kit ) To build the core competence of global health

According to different academic levels, it is divided into different levels such as university department, graduate school and above. This part of the core competence

Discussion and the planning and design of the toolkit, the core character is Jessica Evert Doctor, I have a lot of discussions with him in the

conference, and I have learned a lot. Related to this, the Education Committee of the Global Health University Alliance

Students in one field will conduct inter-university research on matters such as their expectations for teaching and their expectations for future jobs after graduation.

Research cooperation, and its research results show that most students' vision of global health work is far from the reality.

The salary of his future job after graduation is also inconsistent with the actual situation, and the ability department should have the relevant job

Points, in addition to the ability available to classroom teachers, based on the experience of teachers in each school and feedback from current and future employers

It shows that the biggest problem with students' employment skills is not hard power, but the department respects the work and coordinated communication with others.

The soft power of teamwork, etc., and how to solve this problem seems to be discussed and resolved in follow-up research.

In addition, in different levels of global health education, I and the chairperson of the subcommittee discussed the current US Global Health

Discuss the development status of students' master's classes and academic programs, and discuss how the school's global health can participate in this topic,

Conduct more detailed discussions.

And I also joined Georgetown University today ( Georgetown University ) Of Rebecca Katz Professor Global

In-depth discussions on the development of the issue of health and safety, Rebecca Katz Professor is currently

The agency's funding established and operated a research center with global health and safety as the main research theme at Georgetown University.

He is also one of the core figures in the development of global health security in the United States. Rebecca Katz The main results and known

information of the professor's meeting are summarized as follows:

1. this year GHSA Since Uganda's implementation of the Ministerial Conference has so far been ineffective, it is likely to change to Australia.

Row.

2. 10 Many months GHSA Related meetings, and Rebecca in 10/31-11/2 Already queued OIE Related meetings,

But she will have a conference schedule in Indonesia this year, so she may be invited to come at international conferences in China, or

Inviting her to Taiwan for round-table discussions and speeches while she is in Asia for a meeting may be considered.

the way.

3. Currently completed JEE Countries have reached 31 Country, but the information has not yet been published in GHSA On the website while Rebecca

Handling all countries JEE First-hand information, I saw the internal evaluation results that are not published, so I have

By decision JEE Evaluate for collaborative research and consider inviting the Harvard team and WHO Stakeholders participate together.

4. The United States is currently WHO Adopting a wait-and-see attitude, and not too concerned about who the director general is about to be elected.

The focus of U.S. concerns is GLOBAL FUND , And will retreat GLOBAL FUND of director Will arrive Georgetown university Teach

and host a research center

(two) 4/7

4 month 7 Day is the first day of the conference. However, before the official meeting starts, I participated in the morning 7:20 Namely by CUGH

A small closed-door meeting convened by the Education Committee on the current toolkit of core competences in global health education ( CUGH

Global Health Education Competencies Tool Kit ) Content suitability, and its different learning groups

Discuss the adjustment mode when setting learning goals in. The participating scholars also proposed that this core competency toolkit

Follow-up suggestions, especially on how to evaluate these core competencies. CUGH

In addition to the strong will of the members of this committee, the research progress and results of the committee will also be tracked as an excellent course for this course.

Reference to the content of the courses and education methods.

The opening speech of the day is scheduled to Megatrends in Global Health As the theme, by CUGH Of Executive Director , KeithMartin  
Professor by Global Fund forAIDS, Tuberculosis andMalaria, Switzerland

Chief Executive Officer Mark Dybul professor, Johns Hopkins University Dean of School of Nursing Patricia Davidson professor, National Academy  
of Medicine Dean Victor Dzau Professor and South Africa Stellenbosch University

Vice-Chancellor Hester Klopper Four speakers, including the professor, discussed this topic. At the beginning of the conference, the host

mentioned the new US President Trump ( Trump ) The proposed new budget significantly cuts the health and environmental protection departments and foreign cooperation

Part of the budget, which may have a considerable impact on the development and research of the global health field, so hopefully

The family can take the initiative to make this relevant through various means, especially through continuous calls to members of Congress.

The situation of budget cuts can be improved. In the topic discussion, all the interviewees talked about

Discussions on global health are still dominated by developed countries. How should the current global health

Regions or developing countries have more participation and dominance, which must be the direction of continuous efforts in the future.

In addition to continuing to participate in discussions related to global health education today, I also visit our representative office in the United States

Lu Daoyang health representative, and continued and closely participated in GHSA Of NGO: Next generation The person in charge

Jamechia Hoyle Doctors meet to discuss the follow-up cooperation, Hoyle The doctor said he was quite willing to 10 month

bottom 11 At the beginning of the month, I went to Taiwan to participate in the GHSA Related international seminars, and its 8 Held in Chiang Mai, Thailand TEPNET A pre-conference workshop is held before the conference to share our country's progress JEE He expressed his high praise for the experience and expressed his willingness to help our country share the experience, so after the discussion, we can get it to help our country through Next generation Website to promote the consensus of our country's experience. As for the video of the sharing workshop, it can be shared online, or Sharing and publicity in other ways are yet to be discussed later. So that I will be GHSA Of affairs Participate, and Hoyle The doctor discussed and learned that the current Next Generation on GHSA There is still three years for business funding from the government (to 2020 Year end) , So it will maintain the original plan to engage in GHSA Related business to this Time stops and then continues. It is still necessary to observe President Trump's investment in global health and security affairs and budget allocation before we can know Know the possible follow-up development.

(three) 4/8

in 4/8 In the agenda part of the day, the conference is in the keynote speech part, with Saving the Planet, Saving Ourselves: Creating Healthy Ecosystems and Healthy People For the topic, give lectures and discussions. CUGH Assembly every year Top Journals of Medicine and Health Lancet Cooperation, in the keynote speeches of the conference, for the important leaders in the global health field And this year is no exception. Last year and this year Lancet Editor in chief Richard Horton PhD one health and planetary health This concept is the core of the initiative and speeches, and the rest of the speakers will also link the earth's ecological environment with human health, emphasizing environmental and ecological issues, especially global warming, in global health The importance of the field.

I also participated in the global health and safety agenda on that day ( The Global Health SecurityAgenda ) Of the show, To listen to relevant research and discussions, the session was organized by the director of the Johns Hopkins University Center for Global Health Thomas Quinn Chaired by the professor and speakers Bonnie Jenkins The lady was originally engaged in the government GHSA Business official, but Yu Chuan President Putin retired from the government after taking office, except to share with the audience GHSA In addition to achievements in the prevention and control of infectious disease Based on his own observations, he proposed to GHSA Concerns about unclear follow-up development. The other three speakers are from the United States Management Sciences for Health The person in charge of this organization Jonathan Quick PhD, University of California, Davis Of One Health Institute Chief Executive Officer JonnaA.K. Mazet Professor, and EcoHealth Alliance Of this organization Health and Policy ProgramCoordinator Of CatherineMachalaba Ms, The three speakers explained the content of their work from the perspective of the global infectious disease prevention and control work they have been focusing on. And the role, function and development of the global health security agenda. After the meeting, I also Bonnie Jenkins The lady exchanged opinions briefly and discussed GHSA The current internal operation situation, and the US view WHO Attitudes and views on the election of the secretary general Point to exchange opinions.

I also participated in the evening FILM FESTIVAL , Watch selected by Pulitzer News Center, The best short documentary in the field of global health, as the Global Health Assembly has been advocating and discussing how to make Global health work can move people's hearts, so in recent years it has been encouraging the use of video recording to tell the academic world's Investment and results of global health work, and CUGH In recent years, they have cooperated with the Pulitzer Prize Selection Committee to select the most

The best global health documentary was broadcast at the conference. This method allows me to learn about the current global health work.

And the latest ways to promote the results of global health work. Maybe in the future this course or our school may also consider similar practices.

In order to let more people know about our investment and achievements in the field of global health.

(four) 4/9

in 4/9 At the day of the conference, I was mainly from Virginia Tech University ( Virginia Tech) VirginiaMaryland College of Veterinary Medicine Of Department of Population Health Sciences Within

KajaAbbas Professor, discussing related research on the prevention and treatment of infectious diseases and the application of big data and new technological tools,

KajaAbbas The professor originally had a professional background in computer software programming, and now his research topic is the use of computers to prevent infectious diseases.

Simulation analysis and research on the spread of treatment, because it is similar to how the current cutting-edge technology is applied in the field of infectious disease prevention and control.

When there is research, I exchange opinions and discuss relevant research topics with him.

Let me also discuss the current global health law with lawyer Liu Hanxi, who is currently studying for a doctorate in health law at Georgetown University.

The development of global health law and Georgetown University's global health law giant Lawrence Gostin Professor recent research topics and

initiatives, exchange opinions.

(Fives) 4/10

in 4/10 , I went to the University of Pittsburgh Medical Research Center ( University of PittsburghMedical Center,

UPMC) Meet with Dr. Liu Yanjun and professor, who is a classmate of the university with Deputy Director Luo Yijun of my country's CDC.

In addition to discussing with Professor Liu on the bilateral medical and health-related research cooperation between Taiwan and the United States, he also discussed the current

Personnel distribution and professional trends in the world, and related discussions

~~2. Experience and Suggestions:~~ 二、心得及建議事項：

In summary, my trip to Washington, the United States has yielded fruitful results. Except for the global health education and research,

In addition to in-depth discussions and exchange of opinions with global experts, they also completed the global health and safety plan expected to be completed on this trip.

Perform work. On the whole, I think global health-related research (including global

Health and safety research) is a topic that is at the forefront of global development, and because this topic is highly connected to the world, I

If China wants to keep up with global development, or even help shape this development, my country must continue to participate in the global health

The annual meeting of the Chinese Academy of Sciences and join the discussions of relevant committees to participate in and help shape the global health education and research

Research development.

附件十

出國報告審核表

出國報告名稱: Washington Global Health Alliance (WHO) Workshop participation				
出國人姓名 (2 More than 1 Human representative)		職稱	服務單位	
Cai Fengzhen		Associate Professor	Taipei Medical University	
出國類別	• 考察 • Further study • the study • practice • 其他國際會議 (例如國際會議、國際比賽、業務接洽等)			
出國期間: 106 year 4 month 05 Day to 106 year 4 month 12 Date of submission of report: 106 year 4 month 17 day				
出國人 親自 檢核	計畫主辦 機關審核	審 核 項 目		
•	•	1. Submit the report of going abroad according to the limit		
•	•	2. The format is complete (this article must have "purpose", "process", "experiences and suggestions")		
•	•	3. No plagiarism related information		
•	•	4. Full and complete content		
•	•	5. Suggestions have reference value		
•	•	6. Send this agency for reference or research		
•	•	7. Send it for reference		
•	•	8. Returned for correction, reason:		
•	•	( 1 ) Does not comply with the original approved plan for going abroad		
•	•	( 2 ) Written in a foreign language or only based on the collected foreign language materials		
•	•	( 3 ) The content is empty and brief or does not cover the required items		
•	•	( 4 ) Plagiarizing all or part of the relevant information		
•	•	( 5 ) Citing relevant information without indicating the source		
•	•	( 6 ) The electronic file is not processed in accordance with the format		
•	•	9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication:		
•	•	( 1 ) Handle the seminar (explanation meeting) of the agency's report abroad and share knowledge with colleagues.		
•	•	( 2 ) Submit a report to the agency's business report		
•	•	( 3 ) other _____		
•	•	10. Other handling opinions and methods:		
出國人簽章 (2 People with On to 1 Human generation table)		計畫主辦 機關 審核人	一級單位主管簽章 Signature of its level supervisor	機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel

出國報告 (出國類別: 國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

亞太公衛學術聯盟  
Asia Pacific Public Health Academic Alliance  
第一屆曼谷區域會議  
The 1st Bangkok Regional Conference &  
泰國衛生部及世界衛生組織田野流行病學合作中心參訪  
Field Epidemiology in Thailand's Ministry of Health and World Health Organization  
Visit to School Cooperation Center

服務機關: 臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱: 邱正文教授兼主任  
Name and Title: Professor and Director of Wu Yawen

派赴國家: 泰國曼谷  
Sending Country: Bangkok, Thailand

出國期間: 106年5月24日至106年6月28日  
Duration of going abroad: 106-year 5 month twenty-four to 28 day

報告日期: 106年6月2日  
Report date: 106-year 6 month 2 day



## Summary

In order to implement the "Epidemic Prevention Cooperation Opportunity and Strategic Evaluation Project", participated in the "Pandemic Prevention" hosted by Mahidol U  
APACPH Bangkok Region Conference and The 8th International Public Health Conference toward Achieving Sustainable  
Development Goals, 2030 Meeting" and arranged visits to the Thai Ministry of Health and  
The World Health Organization Field Epidemiology Collaboration Center, the main reception unit is Bureau of Epidemiology It is also the Field  
Epidemiology Collaboration Center of the World Health Organization. The main speaker has a veterinary background Dr. Teerasak  
Chuxnum, He is also primarily responsible for the global health security agenda ( Global Health Security Agenda) And joint external evaluation ( Joint  
External Evaluation) Of contacts. and Proposed that our school will be 8 month 6 Day held in the morning in Chiang Mai, Thailand TEPHINET  
Pre-ConferenceWorkshop The invitation to the meeting. Deputy Director of the Department of Disease Control Dr. Tanarak Plipat Also WHO International  
Health Regulations National Focal Point ,in 6 month 11~13 When visiting Taiwan in Japan,  
Go further.

#### 1. Purpose and Content:

5/25: Participated in Mahidol University in Thailand The 1<sup>st</sup> APACPH Bangkok Region Conference & the 8th International Public Health Conference

toward Achieving Sustainable Development Goals, 2030 Meeting", morning meeting

The meeting kicked off after the speech by the President of Mathieu University, keynote speaker Is the Asia-Pacific Public Health Academic Alliance ( APACPH) which is

The chairman of the board of directors, Professor Zhengfeng Shen Ma, he is also the head of the Department of Global and Regional Health of the University of Tokyo, and has been a

Visiting professor for several years. In his speech, he reiterated the importance of healthy human rights and sustainable development goals in the Asia-Pacific region, and pointed

The principle of how to continue should be Vertical versus Horizontal Approach Two-pronged approach. Oral report in the afternoon as a moderator " Infectious

diseases and disease prevention " Exchange professional opinions with participants from various countries during the session. Multiple presentations showed that vector mosquitoes

Disease surveillance, screening, testing, prevention and treatment are all topics of concern in Thailand.



5/26: Visit to Thailand Ministry of Health and World Health Organization Field Epidemiology Cooperation Center

I left for the Ministry of Health of Thailand at 8 in the morning. Department of Disease Control visit. The main reception unit is Bureau

of Epidemiology It is also the Field Epidemiology Collaboration Center of the World Health Organization. The speaker has a veterinary background

Scenic Dr. Teerasak Chuxnum, He is also primarily responsible for the global health security agenda ( Global Health Security Agenda)

And joint external evaluation ( Joint External Evaluation) Contacts, Qu said that Thailand will accept

WHO Arranged external evaluation by experts to ensure the progress of the implementation of the International Health Regulations, and all relevant ministries have been mobilized

Close, the country 68 International ports ( Point of Entry) Although only a dozen of them have been evaluated, it is already a huge project. He said that he

has read the evaluation report of our country, and our country scores higher than that of the United States. He is very willing to share it in the future and provide relevant information on

The document is for our country's reference. He said that it will be held in Chiang Mai, Thailand in August TEPHENET At the annual meeting, all members of the unit will participate

And, sent hundreds of people.

On the spot that our school will be 8 month 6 Held in the morning TEPHINET Pre-Conference Workshop Invitation to the meeting.

And invited its supervisor, the deputy director of the CDC Dr. Tanarak Plipat in 6 month 11~13 Visited Taiwan in Japan to discuss further. Dr.

Tanarak Plipat Also WHO International Health Regulations National Focal Point .



5/27: APACPH Executive committee meeting: discuss planning APACPH The future direction and development strategy, agenda and conclusions are as follows:

1. The exact steps for formulating proposals for the Global Challenge Research Fund, Secretary General Bruce Maycock The professor will provide everyone

Reference materials for detailed proposals. The post is considering a proposal for cooperation with Sri Lanka.

2. The term of office of the secretary-general: the original 2 Year extended to 3-5 Years to help the stable operation of the conference. Three, update 49 Session

APACPH Meeting-The agenda of the meeting has been confirmed by our recommended actor, Wang Yingwei, Director of the National Health Administration

Invited to give a public performance in the first and third plenary sessions.

Four, decided to establish another 5 People Working Group ( Task Force) Continue to explore APACPH The five-year development strategy, formulated and established

Goal fit output and outcome , To give full play to the role and influence of the alliance in promoting public health in the Asia-Pacific region. The new

chairman and secretary-general have invited posts to join this strategic development working group.



## 2. Experience and suggestions:

1. The Thai Disease Control Agency has been invited ( Department of Disease Control, Ministry of Public Health) Deputy Director Dr.

Tanarak Plipat And subordinates Miss Kiratikarn Klagsawad Epidemiology Bureau of Thailand, IHR Capacity development team

Senior officials come to Taiwan to visit and give speeches, the date is 6 month 11 Day~ 13 day. For this school 8 month 6 Lord Day in Chiang Mai, Thailand

Do it TEPHINET Attend pre-conference workshop And future bilateral cooperation can be further discussed.

2. Preparation in mid-August APACPH The executive committee and the annual meeting proposed the establishment of the "Asia Pacific Health Promotion Collaboration Center".

The secretariat will be set up in our school during the brewing period. This trip will also be recognized by representatives from participating countries including Japan, Thailand

We will continue to contact all parties to modify the proposal so that it will be sent to APACPH The secretariat.

附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: The Asia Pacific Health Alliance 2016 Regional Meeting, Thailand Ministry of Health and the World Health Organization Field Epidemiology Network, etc.			
出國人員姓名 ( 2 More than 1 Human representative)		職稱	服務單位
Qiu Yawen		Professor and Director	Taipei Medical University
出國類別	• 考察・進修・研究・實習 • 其他國際會議 (例如國際會議、國際比賽、業務接洽等)		
出國期間: 106 year 5 month twenty four Day to 106 year 5 month 28 day		報告繳交日期: 106 year 6 month 2 day	
出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目	Item
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad and share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:	
出國人簽章 ( 2 More than people, Be able to 1 Human representative)		計畫主辦 機關 審核人	一級單位主管簽章 機關首長或其授權人員簽章

出國報告 (出國類別：國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

## 第三屆全球生物安全高峰會 The 3rd Global Biosecurity Summit

服務機關：臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱：蔡奉真 副教授  
Name and Title: Associate Professor Cai Fengzhen

派赴國家：美國 特區  
Country and to: United States DC Special Zone

出國期間：106 年 6 月 26 日至 7 月 03 日  
Going abroad: 106 year 6 month 26 Day to 7 month 03 day

報告日期：106 年 7 月 10 日  
Report date: 106-year 7 month 10 day

## Summary

I went to the United States this time DC Special Economic Zone, mainly based on Mr. Guo Xusong (former Director of the Disease Control Service, now the chair professor of the And our country's unemployed ambassador) suggested that, on behalf of Beijing Medical University, participate in the highly relevant global health security Biodefense world summit 2017 . This meeting is related to 6 month 26-29 U.S. Virginia Alexandria City Westin Hotel Convened.

This one biodefense The conference is more special, because it is a rather cross-disciplinary conference.

In addition to the latest technology developed to protect global health security, it also includes how to make this important and important for national epidemic prevention.

Important technologies can be developed and used commercially, especially what methods can the country adopt to help or

Accelerate the development of this technology and help it be commercialized. In short, this conference focuses on how to

Private cooperation ( Public-Private Partnership ) This model and system are used to develop safety and health-related technologies and products.

Concerns and topics of discussion at this meeting are very important in the issue of global health security, and they are all relevant internationally.

The issue is of considerable concern, such as the World Health Organization ( WHO ) And the United States CEPI This alliance and system is

Promote the development and marketing of vaccines for emerging infectious diseases through public-private collaboration. But China is relatively unfamiliar with this topic

Notice. The core concept of such a system and conference is that the capital market is determined by supply and demand to determine the production and circulation of commodities or

Possibility, but many technologies needed for global health security, such as technologies for early detection of viruses or sources of infection, rapid screening

Accurate screening technology for infecting patients and deciding the next public health action, as well as the development of targeted vaccines, etc., are the global health

Technologies and issues that are very important in health safety, but the types of technologies or products have a high degree of public welfare and uncertainty.

In situations where the demand for normality is not high, most manufacturers do not have sufficient incentives to develop these technologies, but if they rely solely on the scientific

Research, because there is a huge gap between the research results and the actual use of the product, so that when a health safety incident occurs,

There is a problem that laboratory technology cannot be converted into practical products. To solve the above problems, the United States has developed BARDA

( Biomedical Advanced Research and Development Authority ) This system requires such products in the government

In order to maintain public health and health safety, assist the development of related technologies, and the industrialization of technologies, so that related products

The industry can survive and develop.

In terms of this requirement and idea, this seminar includes the two main subjects of infectious diseases and bioterrorism attacks and food safety.

The participants of this conference are also different from the purely academic seminars. The participants from academia, industry and government

The distribution of participants is fairly even. Among the participants in government units, the US Food and Drug Administration ( FDA )and BARDA There are many

People attended the meeting, and military systems such as the Ministry of National Defense also sent many people to the meeting to give lectures and participate in discussions.

## 1. Purpose and Content:

In this conference, the main sessions that I and Mr. Guo Xusong participated in were related to the prevention and treatment of infectious diseases.

In this part, there are three main themes in the planning of this conference: Biodetection technologies: biothreat & pathogen detection , Biodetection technologies: PoC for biodefense and Sample prep technologies . In the conference agenda, located in Office of the Assistant Secretary for Preparedness and Response in the US Department of Health and Human Services Down BARDA Project manager Donna Bosten In the first

The sky is there BARDA This office and system, as well as its purpose, functions and results are briefed and explained, based on this

Last, I and Mr. Guo Xusong listened to many of the most advanced science and technology developed by the United States to detect biosafety.

Most of the technology is developed by scientific laboratories or research institutes funded by the United States, including those located in the Department of Defense

The laboratory under the door. For example from Navy Research Laboratory of Patricia Legler Doctor, just use Stability of Isolated

Antibody-Antigen Complexes as a Predictive Tool for selecting Toxin Neutralizing Antibodies Give keynote speeches, and from the

industry Neeraja Venkateswaran PhD and Eran Eden PhD

Then explain the latest related products of the company and its effectiveness in practical application.

The above-mentioned cutting-edge technologies have inspiring significance for the early detection and screening of infectious disease prevention and control in our country.

In the future, China can carry out relevant research cooperation with related laboratories. But the more important learning in this conference is to understand the United States as

He is field-usable by assisting the commercialization of related technologies ( field use ) System in order to achieve the

The purpose of using the technique in real life, as well as the current situation in the United States for large-scale infectious disease outbreaks or bioterrorism

When a health and safety incident such as an attack breaks out, how to respond to the discussion of handling. And in the sessions discussed, from

BARDA systematic Paul S Eder Ph.D. and speakers from research units and the industry, respectively, on the difficulties faced in the process of

technological development and commercialization of the results, among the participants FDA Officials also BARDA The experience of interaction

and cooperation shows how the government can assist the industry in alleviating the difficulties and costs of commercialization in this process.

And the support attitude of government units towards manufacturers of biosafety-related technology.

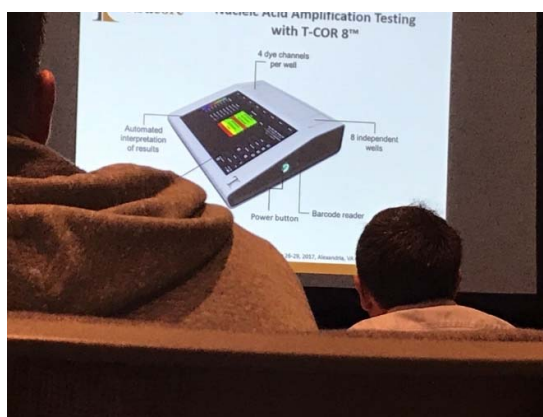


Picture: Mr. Guo Xusong took a group photo with me in front of the conference poster

except BARDA Outside the system, defense research unit United States army research institute of infectious



disease (USAMRIID) The director Gustavo Palacios Professor, also with The ADEPT PROGRAM: accelerated defense against emerging dangerous pathogens For the topic, explain the recommendations of the US Department of Defense and WHO Cooperation to assist specific emerging infectious diseases by establishing a platform to accelerate the launch of vaccines for emerging infectious diseases Infected vaccines are on the market, and he stated in his speech that the main work of his unit is to assume good early detection technology In the state of non-existence, find a solution to the problem, and ADEPT The plan is that the unit is currently spawned and focused To deal with the plan, our country should understand the system and consider the response or amendment of our system from it. Gustavo Palacios The professor also mentioned an interesting concept: the hospital train ( Hospital train ) , Which means that this concept is not new, and the second In wartime, there are many ways to use hospital trains to transport the wounded and sick. In addition to providing immediate treatment, they can also be used for transportation. In the process, we will continue to provide patients with good medical care services and improve the effectiveness of treatment. This practice is worthy of our country's reference.



Picture, the speaker's explanation on the latest technology and products for epidemic prevention and detection

During the conference, the organizer placed relevant publications published by it in the venue: Health Security and Food Safety Two journals, of which Health Security This journal just published a special album from Taiwan, a freely available publication in the venue, which helped my country's role in the global health and safety network, its importance and my country's attention. Good publicity also made our country's participation in this time very meaningful.



Picture, periodical documents displayed and freely accessible in the venue ( Health Security For Taiwan JEE Special feature) In addition to participating in the conference, I also went to the US Capitol with Guo Xusong this time ( Russell Senate Office

Building ) , Participation is currently located in John Hopkins Down Health Security center (le the original UPMC ) The title is "What is needed now to prepare for major health emergencies" Meeting, meeting

In addition to inviting regional epidemic prevention officials to attend the meeting to explain that the permanent public health system is in response to epidemic prevention and em

In addition to its role and importance, it also demonstrates continuous participation and promotion from the perspective of global health and safety JEE The importance of the syste

This calls on Congress to retain and increase the relevant budget, rather than cut it. I and Guo Xusong are also at the meeting

Afterwards, they exchanged opinions with the staff of the Health Security Center and discussed the different aspects of my country and the United States in the global health secu

Cooperation, discussing information exchange and follow-up work promotion.

During my business trip to the United States, I also paid a visit to Dr. Lu Daoyang, my country's health representative in the United States.

The content of the discussion provides its reference, and it also exchanges opinions on the mode and progress of my country's work in global health security.

Exchange, and conduct an in-depth discussion on the coordination and collocation of the execution content of this health and safety plan and its work content.

Also, during this business trip to the United States, I also visited to promote the global health and safety agenda in the United States and around the world  
( Global Health SecurityAgenda Georgetown University plays a very important role in Rebecca Katz professor,

And in relation to IHR versus JEE A comparative study of the effectiveness of different evaluation modes, and a more in-depth and detailed discussion.



Picture: Health and Safety Conference held in the Capitol



Picture: Mr. Guo Xusong and himself after the Capitol meeting Health Security Center Group photo of the staff

## 2. Experience and suggestions:

On the whole, global health security is an important issue of the Global Health Center, and we are eager to expand our visibility in my country.

While participating in global networks and conferences related to the prevention and control of infectious diseases, we will gain a comprehensive understanding of the issues and

Flowing practice is necessary. In addition to being promoted by Mr. Guo Xusong, an important and key figure in my country's global health security, this meeting

In addition to the recommendation, participating in this conference also declares our country's determination and efforts to join the global health safety network, and our school par

The importance of the global health network will be strengthened through the process of meeting participation and network connection.

In addition to participating in discussions at the conference and discussing research cooperation matters with important scholars in the field, I also

Visiting scholars in related fields. In addition to increasing the visibility of the school's development in the field of global health and

Quneng understands and knows the development and prospects of our country and our school in the field of global health

Scholars from all fields have more close contacts and exchanges. In the future, I and my school's research and research in the field of global health and safety

Develop and lay a deeper foundation.

附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: Washington 95 Biodefense World Summit 2017 Participate in 參加			
出國人姓名 ( 2 More than 1 Human representative)		職稱	服務單位
Cai Fengzhen		Associate Professor	Master's Program in Global Health and Development, Taipei Medical University
出國類別	• 考察 • 進修 • 研究 • 實習 • 其他 國際會議 (例如國際會議 國際比賽 業務接洽等)		
出國期間: 106 year 6 month 26 Day to 106 year 7 month 03 day		報告繳交日期: 106 year 7 month 10 day	
出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目	Item
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:	
出國人簽章 Signature of the person going abroad ( 2 More than people, Be able to 1 Human representative)	計畫主辦 機關 審核人	一級單位主管簽章 Signature of its level unit supervisor	機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel

出國報告(出國類別:拜會)  
Going Abroad Report (Going Abroad Category: Meeting)

拜會 Johns Hopkins University School of Public Health and  
JHSPH Center for Health Security

服務機關: 臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱: 郭乃立院長  
Name and Title: Dean Guo Nai-lin

派赴國家: 美國  
Country Name: United States

出國期間: 106 年 7 月 9 至 15 日  
Duration of Going Abroad: 106 year 7 month 9 to 15 day

報告日期: 106 年 7 月 28 日  
Report Date: 106 year 7 month 28 day

## Summary

This time I am on a business trip to the United States, the itinerary will go to the University of Pennsylvania to visit exchange students and discuss health and safety cooperation. And then with our country CDC Close work Johns Hopkins Center for Health Security , Ask him about the disease in our country. Of the Control Department JEE The areas that my country can improve in the report include epidemic prevention cooperation, talent cultivation, GHSA with JEE Wait for the topic. Row discussion. Another visit Penn State University Department of Public Health, Johns Hopkins Public Health College negotiates health and safety people. To cultivate cooperation.

## ~~1. Purpose and Content:~~ 目的及內容:

First visit this time Penn State University Huang Wenke, the director of the Department of Public Health and the exchange students of this hospital, and discussed the feasibility of cooperation in the cultivation of health and safety talents; next visit to my country CDC Close cooperation Johns Hopkins Center for Health Security , Ask him about our country CDC Of JEE What can be improved in the report in order to establish follow-up Establishment of strategic planning roadmap; final visit Johns Hopkins Senior Academic Associate Dean of School of Public Health Prof. Laura Morlock , Dean of Epidemiology Prof. David Celentano , Director of Health Finance Center Prof. Gerard Anderson Et al., plan for future cooperation in epidemic prevention and talent cultivation between the two schools.

106 year 07 month 09 Day (Sunday): Arrive Washington DC , Take a break

106 year 07 month 10 Day (Monday): by DC Self-driving to Hershey Pennsylvania State University School of Medicine

106 year 07 month 11 Day (Tuesday): Visit our school and exchange it with the Department of Public Health of Pennsylvania 3 Classmates (including two public health departments and 1 Students from the Department of Medicine) and co-director Huang Wenke

Let us discuss the possibility of future cooperation in the cultivation of health and safety talents.

106 year 07 month 12 Sunday (Wednesday): Go to Baltimore Visit with our country CDC Close work Johns Hopkins

Center for Health Security

106 year 07 month 13 Day (Thursday): Visit Johns Hopkins Negotiate cooperation content

106 year 07 month 14 Day (Friday): Distance

106 year 07 month 15 Day (Saturday): Return to Taipei

The main purpose of this short visit to the United States for the visit was twofold:

1. Visit our school and exchange it with the Department of Public Health of Pennsylvania 3 Classmates (including two public health departments, 1 Medical students) and to Professor Huang Wenke asked about the possibility of future cooperation in the cultivation of health and safety talents.

3. Work in 07 month 12 Visit to my country on Sunday (Wednesday) CDC Close work Johns Hopkins Center for Health

Security , Ask him about our country CDC Of JEE What can be improved in our report in the report; 07 month 13 Before Sunday (Thursday)

to Johns Hopkins The School of Public Health discussed the content of future cooperation, and hosted a dinner that evening Johns Hopkins Public health

Senior Academic Associate Dean of the College Prof. Laura Morlock , Dean of Epidemiology Prof. David Celentano , Director of Health Finance

Center Prof. Gerard Anderson Wait.

## ~~2. Experience and Suggestions:~~ 心得及建議事項:

1. Pennsylvania State University ( Pennsylvania State University) The master's degree in public health is affiliated with the school's doctor

College, located in the main campus College Town Three-hour drive town Hershey . Penn State University School of Medicine by Chocolate

Tycoon Milton Hershey Donated (namely a well-known American chocolate brand Hershey Founding

People), due to Hershey In order to ensure the source of its chocolate raw material cocoa, the company is

Ghana and others have maintained good relations. The Department of Public Health of the School of Medicine of Pennsylvania State University has begun to cooperate with G

Opened a wide range of public health and health safety cooperation (such as infectious disease prevention, education, etc.), Penn State University School of Medicine

The Department of Medical System and Public Health has also trained many countries in Central and West Africa TB Talents such as prevention and treatment; given time, pre

Penn State University School of Medicine Department of Public Health should be able to become Pennsylvania Of the world's health and safety center,

Our country has just started in this regard. In the future, the public health departments of Peking University and Penn State University should be able to communicate more with

Complement each other and grow together.

## 2. Johns Hopkins Center for Health Security Of the predecessor UPMC Center for Health Security Just last year

Done for our country JEE Assessment work. last year 8 Led the world to eradicate smallpox UPMC Center for Health

Security founder Dr. Henderson After passing away, UPMC Center for Health Security I'm going ( 2016)

year 12 Yueyizhi reinvested Johns Hopkins University Faction, renamed Johns Hopkins Center for Health

Security , Because I am Johns Hopkins Alumni feel closer to the center. This visit to the center won

Director of the Center Dr. Tom Inglesby Reception, Dr. Inglesby Repeatedly reiterate that the center and TCDC Long-lasting friendship

Partnership and promise to send personnel to participate in this project as much as possible 11 Forum held in September (later because the center must host India

Factors such as the delegation will serve the law). Johns Hopkins Center for Health Security The tentacles of international cooperation are very

Broad, in the future, whether Beijing Medical University or the Disease Control Department should maintain a close relationship with it at any time, Beijing Medical University is

The agency plays the role of strengthening ties.

## 3. Johns Hopkins University School of Public Health As the center of American health policy, UPMCCenter

for Health Security Invest in JHSPH After the camp, its global health and security policy in the United States or internationally

Will play the role of a leader, our school will soon cooperate with Johns Hopkins University Sign a cooperation agreement ( MoU) ,

Can be with Johns Hopkins University Work together to improve teaching and research on domestic global health safety.



附件一

# 出國報告審核表

出國報告名稱: 拜會美國賓州州立大學, Johns Hopkins University and Johns Hopkins Center for Health Security			
出國人姓名: ( 2 More than 1 Human representative)			
職稱		服務單位	
Guo Naiwen		Dean School of Public Health, Taipei Medical University	
出國類別	• 考察 • Further study • the study • practice • 其他 • 其他 • 其他 (例如國際會議, 國際比賽, 業務接洽等)		
出國期間: 106 year 7 month 9 Day to 106 year 7 month 15 day		報告繳交日期: 106 year 7 month 28 day	
出國人員	計畫主辦機關	審核項目	
自我檢核	關審核	1. Submit the report of going abroad according to the limit 2. The format is complete (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handle the seminar (explanation meeting) of the agency's report abroad and share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:	
出國人簽章	計畫主辦機關	一級單位主管簽章	機關首長或其授權人員簽章
To 1 Human representative)	機關審核人		

出國報告(出國類別：國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

泰國馬希賓大學擔任客座教授  
Visiting Professor at Mahidol University in Thailand  
第九屆全球聯合流行病學與公共衛生  
the ninth Global Joint Epidemiology and Public Health  
科學研討會 會前工作坊  
Science seminar & pre-conference workshop

服務機關：臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱：蔡幸真 副教授  
Name and Title: Associate Professor Cai Xingzhen

派出國家：泰國曼谷清邁  
Country Name: Bangkok Chiang Mai Thailand

出國期間：106 年 7 月 09 日至 8 月 10 日  
Going abroad: 106 year 7 month 09 Day to 8 month 10 day

報告日期：106 年 8 月 16 日  
Report date: 106-year 8 month 16 day

## Summary

From the perspective of plan implementation, during my business trip to Thailand, there are two main tasks: 1) One is before

During his tenure as a visiting professor at Mahidol University in Thailand, he was looking for a suitable position for the school to assist the Department of Disease Control in Chiang

TEPHINET Pre-conference workshop ( pre-conference workshop) The host or talker; 2) The second is to go to Chiang Mai to assist the TEPHINET

Pre-conference workshop ( pre-conference workshop) It is held.

# 1. Purpose and Content :

## (1) The execution of the health and safety plan

I am in the Department of Disease Control Health and Safety Program, Chiang Mai TEPHINET One of the main organizers of the pre-conference workshop, My business trip is on 7 At the beginning of the month, I went to the Mathieu University in Thailand for a visit, and I was familiar with the university's School of Public Health. Key personnel who can conduct research, cooperation and exchanges with our country, and on the basis of mutual understanding and familiarity, find suitable positions Our school assisted the Department of Disease Control to organize the TEPHINET Pre-conference workshop ( pre-conference workshop) The host Or talk to the person.

As this time co-organized by our school, it was held in Chiang Mai TEPHINET Pre-conference workshop ( pre-conference workshop) Starting from the role of schools in global health and safety issues, the department talked about the Chinese government's participation in health and safety issues. Ministry Assessment ( Joint External Evaluation, JEE ) Experience sharing, so I contacted and frequently visited the relevant scholars of Mathieu University in early August to study this topic, as well as officials of the Thai Disease Control Agency who have had contacts with our country. For the purpose and content of this pre-conference workshop, ask other experts about their willingness to participate in this pre-conference workshop, or ask them to recommend suitable Candidates to participate in this pre-conference workshop.

In the part of school teachers, I have visited the School of Public Health MPH Director, former post of the Department of Epidemiology Mathuros Tipayamongkholgul Professor, and former official of the Thai Disease Control Service, former Thai International Health Regulations ( International Health Regulations 2005 ) Contact point ( Focal point ) , Currently working at Mathidou University Community Health AjcharaVararuk Professor, discuss related matters, and finally invited Ajchara Vararuk The professor participated in this pre-conference workshop as the main Holder. And is currently the Deputy Director of the Thai Disease Control Agency Tanarak Plipat Under the joint recommendation of several teachers, the current officials of the Thai Disease Control Agency and the current contact point of Thailand's International Health Regulations Teerasak Chuxnum Physicians participate in the pre-conference workshop, as the host. Originally only by email and Teerasak Chuxnum The doctor contacted but received no response. With the assistance of the teacher, I contacted him directly. With the assistance and invitation of the teacher from Mathidou University, I finally got Teerasak Chuxnum The doctor's approval to participate in this pre-conference workshop in Chiang Mai.

I also agreed to assist this time with two Thai experts TEPHINET After the pre-conference workshop, he continued to serve as the The side's communication channel exchanges information needed for the meeting, and exchanges opinions on how to proceed with the meeting. communication.

In addition, the Department of Disease Control hopes that the Beijing Medical Team can assist it in setting up sites in Southeast Asian countries for tuberculosis prevention and Looking for suitable contacts and cooperation units for dengue fever prevention and other matters, and I hope to take advantage of the deputy director's visit to Chiang Mai to participate TEPHINET During the pre-conference workshop, I had relevant cooperation discussions with relevant key persons and officials, so I took advantage of the During his visit at Mathido University, he discussed this topic with a number of relevant teachers and personnel, and asked him to help invite appropriate officials. In Chiang Mai TEPHINET During the meeting, we discussed relevant cooperation topics with officials of the Chinese Disease Control Agency.

While in Chiang Mai TEPHINET Pre-conference workshop ( pre-conference workshop) In the ongoing part, I am not only Chiang Mai TEPHINET One of the organizers of the pre-conference workshop is also the team of Beijing Medical University and TEPHINET The main link of the conference

Department of people. Intensive preparatory work in the past few months, and with TEPHINET After the frequent twists and turns of the conference, this People finally 8/5 Fly from Bangkok to Chiang Mai, on the spot TEPHINET The pre-conference workshop is held for final preparation.

in 8/5 On the same day, in addition to the staff who arrived first, I went to the venue to inspect the venue layout and related equipment. In addition to the situation, I will also confirm with the staff again on the meeting process and the way of proceeding. During this period, I and the work The team finally encountered the meeting preparation process, the representative TEPHINET Chairman DionisioHerrera The doctor communicated with me and exchanged opinions Khurram Butt Sir, and with his assistance, confirm the relevant equipment and furnishings of the venue. In addition, I also With Mathieu University in Thailand as the host of the workshop AjcharaVararuk Professor and official of the Thai CDC Dr . Teerasak Chuxnum Physician, regarding the focus and expected conduct of this workshop, as well as our expectation of the assistance of the two hosts Matters, final discussion and confirmation.

8/6 This is the day when the pre-conference workshop officially debuted. TEPHINET The work of the pre-conference workshop is the emcee of the workshop. The chief executive will control the rhythm of the meeting and assist in the discussion. This time, Beiyi assisted the Department of Disease Control Hold it TEPHINET The pre-conference workshop titled [ FETP and Evaluation of Preparedness: Experience Sharing ] , It is known before the conference that the number of registered participants in this pre-conference workshop is close to 30, and most of the registered persons are from Southeast Asia (Indonesia and the Philippines) related officials of the Disease Control Bureau, 8/6 On the day of the meeting, what was pleasantly surprised was the number of participants and participants The nationalities of the participants are more and more enthusiastic than originally expected. The participants in the pre-conference workshop except for those from Indonesia and the FETP In addition to professionals related to epidemiology, there are also officials from Pakistan and African countries!

Since the pre-conference workshop has reached a consensus to strengthen the interaction between the speaker and the audience during the preparation process, I As the emcee of ceremonies, it is going in this direction. At the beginning of the meeting, the deputy director of the Chinese Disease Control Agency And after the speech by the officials of the Thai Disease Control Agency, the audience was invited to introduce themselves individually, so that the speaker could, on this basis, Carry out follow-up speeches and interactive arrangements.

The first speaker of the workshop was Dean Guo Naiwen of our school. Dean Guo Yi [ Promoting Health Security: PotentialRole, and Future Directions of a Medical University ] As the topic, give a speech to explain the The role that can be played in the whole issue is to cooperate with the government and complement each other, and take Beiyi as an example to illustrate the role of the Medical University The assistance and effectiveness that can be provided in the security policy and implementation. After Dean Guo's speech, Mahidol University, Thailand Ajchara Vararuk The professor also cited Mathieu University in Thailand as an example to echo Dean Guo's appeals and propositions. Then the audience also commented on how the Medical University How to assist FETP The trainees' skill enhancement and promotion are from the perspective of lively discussion.

The second speaker of the workshop is Dr. Huang Songen, an epidemic prevention physician of the Department of Disease Control. FETPALumni's Role in the Evaluation: Examples and Experiences ] Gave a speech on the topic, which divided the audience into groups and invited them to Group discussion methods to discuss the advantages and disadvantages of inviting internal experts and external experts to conduct related assessments, which promotes interactive communication Not only the interaction and atmosphere between the speaker and the audience, and between the audience and the audience, but also the audience can participate in the discussion Discussion and interaction, and more involved in the discussion and explanation of the topic. After the group discussion, the results of each group's discussion can also be shared. It can be seen that the speaker hopes to have a deeper understanding of the problem through the audience's own thinking and thinking, and the effect is fruitful. due to

Thailand has just completed the external assessment of health and safety, so officials of the Thai CDC Dr. Teerasak Chuxnum The doctors are not only very skilled in this topic, but also very sensitive. In addition to responding to Dr. Huang's speech, they also shared the experience of Thailand. Experience, provide listeners with more diversified thinking and opinions.

The third speaker of the workshop is Dr. Luo Yijun, the Deputy Director of the Disease Control Department, who wrote [ Face-to-Face: Highlighting FETP in Preparedness and Risk Communication ] To give a speech on the topic, before his speech, served as the host of the North Medical Director Qiu Yawen introduced Deputy Director Luo in a humorous way. Therefore, before Deputy Director Luo's speech, the kindness between the speaker and the audience An interactive atmosphere has already been established. Deputy Director Luo explained in his speech that my country FETP The training situation and work, and carefully Provide photos of our national defense epidemic doctors who could not be present on the day, and use this as an example to illustrate how our country conducts FETP Training, and a He assists them to strengthen their relevant professional capabilities by directly participating in and assisting in practical work. Due to the performance of Deputy Director Luo The talk is humorous and lively, so the audience's response is quite enthusiastic. The scene is not only lively, but the interaction between the speaker and the audience is also frequent Network.

Overall, this time TEPHINET The pre-conference workshop went smoothly and successfully. Not only did the number of participants account for all pre-conference workers The crown of the workshop (compared from the information obtained by the staff and attendees who visited each pre-conference workshop) Of the workshop It went smoothly and enthusiastically. After the meeting, all participants took group photos together. This time TEPHINET Draw in the pre-conference workshop A happy ending.

In the afternoon of the same day, Dr. Luo Yijun, Deputy Director of the Department of Disease Control and Professor Guo Xusong, the unemployed ambassador of my country, Accompanied by Dean Guo Naiwen, Professor Qiu Yawen and myself, the meeting with Mathieu University in Thailand Ajchara Vararuk Professor, Thai Qing Mai Qian and Deputy Director of Local Disease Control Department ( Office of Disease Prevention & control, Department of Disease Prevention & control, Ministry of Public Health, Thailand ) Piyada Kunawararak PhD and current disease Officials from relevant units of the Control Department Thitipong Yingyong Doctors discussed the establishment of cooperation bases between my country and Southeast Asian countries for tuberculosis prevention and dengue fever prevention and treatment. In the meeting, Thai experts discussed how to conduct tuberculosis and dengue In addition to explaining the prevention and treatment of fever, it also discussed how Thailand controls and cooperates with migrant workers in other countries at the border. After listening to the needs and problems of our country, the Thai experts also discussed the possible topics, paths and methods of cooperation with our country. Give advice.

## (二) 研究與教學合作部分

In addition to assisting the disease control agency's plan, I also participated in the exchange of scholars at Mathidou University. Research and teaching cooperation, interaction and understanding. I call on the current Dean of the School of Public Health of Mathidou University at that time Prayoon Fongsatitkul Outside the professor (the new dean has already 8/11 Elected on the day) Also called on the Associate School of International Affairs of the School of Public Health long Kwanjai Amnatsatue professor. During this period, I learned that the School of Public Health and Public Health of Beijing Medical University Courtyard level MoU Has expired, and Thailand has updated the version MoU The document was sent to our school, but no response was received in time Later, he also assisted in facilitating the cooperation between the Dean Guo Naiwen of the School of Public Health and Qiu Yawen, Director of the School of Public Health of the Ministry

School plans and tasks, in 8 month 9 When visiting the School of Public Health of Mahidou University in Thailand, signed an updated version of the hospital level MoU .

- **教學**

During the exchange of scholars, at the invitation of the School of Public Health of Mathidou University, to the doctoral students of the Global Hygiene Program, International MPH Program students and exchange students from Wuhan University, China, are teaching global health-related courses.

After the discussion with Teacher Guan, the teachers of Mathidou University were very interested in the background and research of my dual expertise in public health and law.

Interesting, so I invite myself to [ Global policy and law in infectious disease control ] As the topic, give a speech. In class

During the interaction with Cheng, I have a deeper understanding of the background and quality of the students of Mathidou University.

The fact that the faculty background of Hido University has complementary functions and the positive reactions given by the students after class have also made Hido University happy

Starting to recruit me as a visiting professor of the Global Hygiene Program, I am quite optimistic about the follow-up development of this matter.

If this matter can be promoted, it will not only make the academic exchanges and research and teaching cooperation between our school and Matteo University closer, but also my country's new southward policy is positively helpful.

Originally, Mathieu University also hoped to arrange for me to give MPH The students of the program gave a speech, but because of the The system is different from our country. When time cannot be coordinated, they have to give up with hatred. However, both sides also talked about their regular visits to Thailand in the Possibility and arrangement of lectures and researches at Mathidou University in China.

- **研究合作**

In the research cooperation part, I originally worked with the School of Public Health MPH Director, former post of the Department of Epidemiology Mathuros Tipayamongkholgul Professors, have relatively close contacts and interactions, and have been

Cases and the effectiveness of related global infectious disease prevention and control policies, and started discussions on collaborative research. This time I also took advantage of the

During the research period of the exchange scholars, the two parties will conduct more frequent research on the details of the cooperative research, data collection and analysis path,

Complex and detailed discussions, I and Mathuros Tipayamongkholgul The current research cooperation is focused on understanding the core competence

self-assessment of infectious disease prevention and control conducted by countries in accordance with the requirements of the International Health Regulations, and the actual prevention

Whether there is a positive correlation between the effects and what are the reasons that affect the effectiveness of the prevention and control of infectious diseases. This research col

In the future, Thailand and China will continue to publish this research in the international SCI The direction of grade journals, continue to work hard.

In addition to the research on the effectiveness of the implementation of laws and policies for the prevention and control of infectious diseases worldwide, I have also worked with Director of the Doctoral Program of Global Health of the School, Vice Dean of International Affairs of the School of Public Health at that time Kwanjai Amnatsatsue Professor, discuss the current global health issues of common concern between Thailand and China.

The research I originally hoped to be able to conduct in Thailand is about the impact of global trade on health, especially the tobacco trade

As an example, I hope to find a way to balance global trade and health based on Thailand's successful case of tobacco damage prevention.

Relevant Thai scholars learned after in-depth discussions that most of the current smoke prevention and control problems in Thailand are related to young people.

Although it is a project of concern and monitoring for emerging tobacco hazard prevention and control issues, it has not yet become the target of enthusiastic research.

The plain packaging policy of Australian tobacco products, which is the world's most concern, was challenged by tobacco merchants in the World Trade Organization.

However, because international trade and legal issues are far from their professional training background, they cannot be more in-depth on these issues.

the study. Therefore, instead of discussing the research expertise and concerns of both parties, I will discuss the research topics that Thailand and China can cooperate.

After several discussions, the consensus between Thailand and China is to conduct cooperative research and exploration on related issues arising from an aging society. The discussion, especially based on the fact that aging is increasing and the number of cancer patients continues to rise, on the impact of public health and related factors Should, explore. Both sides believe that Asia, especially Southeast Asia, is concerned about how to deal with the surrounding areas caused by aging. Issues such as euthanasia care and the conflict between patient autonomy and family expectations due to the strong family structure and relationships in Asia In the absence of sufficient attention on issues such as conflicts, during the exchange of scholars, I have KwanjaiAmnatsatsue teach Professor co-authored an article titled [ Rising awareness of palliative care in Asia and Pacific region ]'S short The article is expected to be submitted to the journal editor ( Letter to editor ) In the form of a paper, submitted to the Asia-Pacific Public Health Academic Alliance ( Asia-PacificAcademic Consortium for Public Health ,APACPH ) International class operated by SCI Journal-- Asia Pacific Journal of Public Health ( APJPH ), currently I and Kwanjai Amnatsatsue The professor has also worked with APJPH Periodical Editor-in-chief, will come to Taiwan as a visiting professor in September 4 Professor Luo Huayun from the University of Malaysia got in touch for this short article Initial discussion on submission matters, and hope to receive good news published in journals in the future, as a good research cooperation between Thailand and China. Good start.

At the end of my one-month exchange of scholars, the School of Public Health of Mahidou University in Thailand When Dean Guo Naiwen and Director Qiu Yawen of the Institute of Health Studies went to Thailand to pay a visit, they were in front of the president of the University of Thailand. Dean of the School of Public Health Prayoon Fongsatitkul The professor officially awarded me a certificate of completion for visiting scholars. In addition to commending my one-month hard work and contribution in the School of Public Health, Mathido University, Thailand, it also shows that the two universities are in school and college level The specific results that were made and completed in advance.

## ~~2-Expenditure and suggestions:~~心得及建議事項：

On the whole, the internationalization of universities is the current trend. The original foundation of the internationalization of the university is our country's active expansion of As an important cornerstone of international participation and visibility, under the current active promotion of my country's southward policy, I went to Mathidu University in Thailand this As a one-month exchange scholar group of the School of Public Health, it is the best testimony of the school's international strength and influence. At the same time, the importance of our school in my country's participation in the global health network will also be further enhanced through this exchange of scholars. Strengthen.

In addition to assisting the disease control agency's plan this time, I also participated in TEPHINET In addition to the pre-conference workshop, During the period of visiting scholars, he conducted teaching activities at Mahidou University in Thailand, and was important in the field of global health and infectious disease prevention Scholars, discuss research cooperation matters, or have specific results. In addition to increasing the school's global health and health safety The visibility of development in all fields enables the international community to understand and learn about the development of our country and our school in the field of global health In addition to exhibitions and prospects, as I have more close contacts and exchanges with scholars in the field of global health and safety, I and my school will Research and development in the field of global health and security have laid a deeper foundation.



附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱 Title of report: Visiting professor at Mahidol University in Thailand/The 9th Global Joint Epidemiology and Public Health Science Symposium& Pre-conference workshop			
出國人姓名 Name of person going abroad ( 2 More than 1 Human representative)		職稱	服務單位
Cai Fengzhen		Associate Professor	Master's Program in Global Health and Development, Taipei Medical University
出國類別 Going abroad category	• 考察 • Further study • 研究 • practice • 其他國際會議 (例如國際會議 國際比賽 業務接洽等) • Other international conferences (Such as international conference, international competition, business contacts, etc.)		
出國期間 Period of going abroad: 106 year 7 month 09 Day to 106 year 8 month 10 day		報告繳交日期 Date of report submission: 106 year 8 month 16 day	
出國人員 Person going abroad	計畫主辦 Project sponsor	審 核 項 目 Examine clear item	
自我檢核	機關審核		
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1 . Submit the report of going abroad according to the limit 2 . Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3 . No plagiarism related information 4 . Full and complete content 5 . Suggestions have reference value 6 . Send this agency for reference or research 7 . Send it for reference 8 . Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9 . In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad and share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10 . Other handling opinions and methods:	
出國人簽章 Signature of the person going abroad ( 2 More than people. Be able to 1 Human representative)		計畫主辦 Project sponsor	機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel
		紙單位主管簽章 Signature of the supervisor	

附件二



Picture: I and Dean of the School of Public Health of Mahidol University Prayoon Fongsatitkul Professor and School of Public Health International Affairs  
associate dean Kwanjai Amnatsatsue Professor group photo



Picture, myself and the School of Public Health MPH Director, former post of the Department of Epidemiology Mathuros Tipayamongkhogul Professor group photo



Picture, I and the Department of Nursing, School of Public Health Pimpan Sillapasuwon Professor group photo



Picture, myself and the director of the Department of Biostatistics, School of Public Health Nutkamol Chansatitporn Professor, new director of the Department of Family Medicine

CHAIWATWONG-ARSA, And the Department of Community Health Ajchara Vararuk Professor group photo



Picture, Chiang Mai TEPHINET Group photo of participants after the pre-conference workshop



Picture: Group photo after the Southbound Technical Cooperation Conference

出國報告(出國類別:國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

執行疾管署「防疫合作契機與策略評估」  
計畫前往泰國清邁參與第9屆  
TEPHINET 會議及舉辦會前工作坊  
Implementation of the "Evaluation of Opportunities and Strategies for Epidemic Prevention and Control Cooperation"  
Plan to go to Chiang Mai, Thailand to participate in the 9th  
TEPHINET Conferences and pre-conference workshops

服務機關:臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱:郭乃文教授兼院長、邱亞文教授兼主任、林權舜組員、許結佳助理  
Name and title: Professor Guo Naiwen, Dean and Director, Professor Qiu Yawen, Director, Team Member Lin Quanshun, Assistant Xu Jiejun

派遣國家:泰國曼谷、清邁  
Country sent to: Bangkok, Thailand, Chiang Mai

出國期間:106年8月04日至09日  
Going abroad: 106-year 8 month 04 to 09 day

報告日期:106年8月20日  
Report date: 106-year 8 month twenty day

## Summary

In order to implement the "epidemic prevention cooperation opportunity and strategic evaluation plan", went to Chiang Mai, Thailand to participate TEPHINET Meetings and host field Pre-Conference Workshop , This pre-conference workshop is the first international seminar organized by the Disease Control Agency abroad

Ms. Cai Fengzhen, the Master of Global Health and Development Degree Program of Taipei Medical University, will serve as the emcee of the meeting, and Thai foreign guests will be

The host and interviewer of the first and second lectures, the foreign guests are responsible for the Thai CDC IHR and JEE Official and Thai Guard

Veterinary Medicine, Bureau of Epidemiology, Ministry of Health Dr. Teerasak Chuxnum , And formerly in Thailand IHR Focal Point , Now speaking at Mathieu University

Teacher Dr. Ajchara Vararuk . In addition to two Thai foreign guests who played an important role in the workshop, Director Qiu Yawen also played the third session

The host and talker of the lecture. This workshop attracted people from Taiwan, China, India, Indonesia, Malaysia, Mozambique, Myanmar, Namibia, Philippines, Luanda, Pakistan, Thailand, Isopia, Uganda, etc. 14 country,

total 33 People are present.

#### 1. Purpose and Content:

8/4:

Early morning 4 Depart for Taoyuan International Airport and meet up with Lin Kaishun, Secretary of the School of Public Health and Xu Chunjia Research Assistant, at 7 Check in and go to Bangkok in the afternoon 2 point 30 Arrive at Chiang Mai Airport left and right, go to Queen's Hotel, this is also the 9th epidemic Education and Public Health Prevention Training Network ( Training Programs in Epidemiology and Public Health Interventions Network, TEPHINET) Venue for meetings and pre-conference workshops. Familiarize yourself with the environment after putting down your luggage, this time TEPHINET The meeting was co-organized with the Thai Ministry of Health. Therefore, Thailand mobilized hundreds of workers from the Ministry of Health to Chiang Mai for support. Staying at this hotel, first confirm with the Thai staff today about the time for the next day's site survey and related pre-conference preparation matters. This time held in Chiang Mai, Thailand TEPHINET The pre-conference workshop, after several months of preparatory work, 2 Month and TEPHINET The organizer contacted, revised and finalized the application after submitting the content of the application documents, paid the fees, etc. Preparation process, 6 In the middle of this month, the committee members of the conference have opinions on the subject and content of the application form submitted by us and ne Teacher Cai Fengzhen is also the main contact point for this workshop, in Taiwan time 6 month 20 Morning 8 Point to have a long-distance conference call with the organizer, listen to the organizer's suggestions and discuss related matters, and provide the relevant revision direction to the CDC after the meeting. Deputy Director Jun and the Beijing Medical Team confirmed that 6 month twenty three The revised application form will be submitted to the organizer until 7 At the beginning of the month, it was finally confirmed that the workshop application was approved and will be held as scheduled, and the preparatory work for follow-up payment and foreign guest invitations will begin immediately. 7 month 19 A pre-departure discussion meeting held in a workshop held at the Department of Disease Contr Content and the way to discuss, but also to let 3 Speakers are Dean Guo Naiwen, Deputy Director Luo Jun, and Huang Songen Epidemiologist The teacher confirms the process and the way of proceeding or the need for mutual cooperation and other matters to discuss, and establishes the contact with the participants of this v Groups to facilitate the immediate release and confirmation of follow-up related matters.

8/5:

4 Confirmed with the Thai staff on the afternoon of the day that the site survey can be carried out today is about the morning 11 However, because the organizer is also doing pre-installation work in each venue today, after breakfast, we went to Queen's University with Teacher Cai Fengzhen, Secretary Lin Kaishun and Assistant Xu C The hotel conference center confirms the actual installation work progress. Since the audiovisual equipment has not been completed, the relevant venue layout can only be confirmed Whether the setting conforms to the mode of tomorrow's workshop, and provide photos of the venue to speakers and work colleagues in the same group as the CDC Ren reference. This afternoon, Dean Guo Naiwen, Professor Guo Xusong and foreign guests from Thailand arrived in Chiang Mai one after another. At dinner, Dean Guo decided to host a banquet for teachers from the School of Public Health, Mathidoo University, Thailand Dr. Ajchara Vararuk , This workshop invitation Dr. Ajchara Vararuk As the host and interviewer, the staff of Beijing Medical University who attended the dinner included Professor Guo Xusong, Teacher Cai Fengzhen, Secretary Lin Kaishun and Assistant Xu Chunjia. [With the teacher of the School of Public Health, Mathido University, Thailand Dr. Ajchara Vararuk The Exchange Meal]

8/6:

morning 8 The staff will gather in the hotel conference center for the placement of materials and publications, audio-visual equipment testing, and posters Pasting and waiting for the final cloth work, waiting for the workshop participants to enter the venue one after another. 9 point 30 The sub-workshop officially started, with Qiu Yawen



The director acted as the speaker introducer, and Mrs. Cai Fengzhen acted as the emcee to introduce the guests attending today and invited Luo Yijun from Taiwan's CDC Deputy Director, Official of the Thai Disease Control Agency's Epidemiological Bureau, and also the Thai Global Health Security Agenda ( Global Health Security Agenda, GHSA)/ External assessment tool ( Joint External Evaluation, JEE) The person in charge, Dr. Teerasak Chuxnum Address. Then enter the first theme of today, which will be lectured by Dean Guo Naiwen Promoting Health Security: Potential- Role, and Future Directions of a Medical University , For this theme, BeiYi has developed a unique cooperation model, and Beijing Medical University recruits public health talents from various countries. Then it was lectured by Huang Songen, an epidemic prevention physician of the CDC JEE lessons learned To Taiwan FETP Former executive status, share Taiwan JEE The assessment experience provides students from various countries to think about and discuss The finale was the speech by Deputy Director Luo Yijun of the CDC Face-to-Face: Highlighting FETP in Preparedness and Risk Communication , From the perspective of preparation and risk, throw out multiple questions for students to reflect on, and promote the future with other countries Opportunities for cooperation in epidemic prevention. The students in the meeting all seized this rare opportunity to actively ask questions. Through this event, the participants All have benefited a lot. Attracted this time 14 Countries (respectively Taiwan, China, India, Indonesia, Malaysia, Mozambique, Myanmar (Dian, Namibia, Philippines, Luanda, Pakistan, Thailand, Ethiopia, Uganda) 33 People are present.



Picture, a group photo of participants after the workshop

in the afternoon 2 Click on the venue to continue with the Thai officials Piyathida Kunavarara , Dr. Thitipong Yingyong Discuss the future Opportunities for cooperation, especially in the prevention and treatment of tuberculosis and dengue fever, 4 End the meeting at around point, everyone will go back to the hotel for a rest Dean Guo Naiwen invited the Peking Medical team and colleagues from the CDC to hold a post-meeting review meeting, hoping to have a closer cooperative relationship in the future.





Picture, from left: Professor Guo Xusong, teacher of the School of Public Health, Mathido University, Thailand Dr. Ajchara Vararuk Thai officials

Dr. Thitipong Yingyong , Deputy Director Luo Jun, Thai official Piyathida Kunavarara , Dean Guo Naiwen, Qiu Ya

Director of Literature, Teacher Cai Fengzhen

8/7:

Eight o'clock in the morning TEPHINET The conference officially started, by Dr. Teerasak Chuxnum Acting as the opening emcee, introducing the Thai guard

The Minister of Health and the chairman of the conference organizer continued to deliver speeches, welcoming the enthusiasm of experts and scholars in public health and epidemiology

Participate. Immediately after starting today's conference activities and speeches, to participate in the welcome dinner held by the conference in the evening. The organizer designs an

The play allows participants from various countries to know each other and achieve the goals of this conference, and to allow experts and scholars in public health and epidemiology fr

Experience sharing and exchange.



Picture, from left: Professor Guo Xusong, Dean Guo Naiwen, Deputy Director of the Department of Disease Control, Ministry of Health of Thailand Dr. Tanarak Plipat Qiu

Director Yawen, Teacher Cai Fengzhen

8/8:

morning 10 Click to take a ride with Secretary Lin Kaishun and Assistant Xu Chunjia to leave the hotel, go to Chiang Mai Airport and transfer to Bangkok for a stop

On May, a follow-up visit will be arranged. Upon arrival at Bangkok Airport, the Taiwanese Economic and Cultural Office will be

The secretary of the office, Jiang Chongchang, picked up the plane and went to the hotel where he was staying to put his luggage and tidy up, then lecture with Dean Guo Naiwen and

Professor meeting, afternoon 4 Arrive at the office to meet the new ambassador to Thailand Tong Zhenyuan, discuss future cooperation, from the actual industry

Face-to-face, combined with the acquisition of academic knowledge, the exchange of valuable experience between the two parties, and the talks were very happy; Ambassador Tong

The leader of the Thai Education Group, Lai Brigitte, asked about the entry method of the Thai education system, so as to facilitate the future of the various departments of the School

The feasibility of national enrollment and exchange, Team Leader Lai suggested that it can be locked Mahidol The university and Chulalongkorn University can be exchanged.



Picture, from left: Chair Professor Guo Xusong, Dean Guo Naiwen, Ambassador Tong Zhenyuan of the Economic and Cultural Office in Thailand, Director Qiu Yawen



Picture, from left: Director Qiu Yawen, Team Leader Lai Biji of the Education Group in Thailand, Dean Guo Naiwen

8/9:

morning 8 point 30 By the North Medical School Mahidol The university sent a car to the school, Dean Guo Naiwen led a team to arrive Mahidol The

university met with the head of the school's school of public health. Mahidol The university introduces schools and colleges, followed by Guo Naiwen Academy

The chief introduced the school and the focus of the visit, such as the two hospitals MoU New Southbound issues such as contract renewal and summer school, and finally with

Mahidol Dean of School of Public Health Dr. Prayoon Support, expressed that he would do his best to assist in the implementation of the new southward

project, and he agreed to assist in recruitment 20 A Thai student also subsidized air tickets, and the school subsidized food and lodging to successfully complete the task. This trip is al

MoU The signing. in the afternoon 3 Point by Mahidol The university sent a car to the airport and returned home.



Picture, left: School of Public Health, Mathido University, Thailand Dr. Prayoon Dean, right: Dean Guo Naiwen

## 二、心得及建議事項：

一. The first international conference for the implementation of the “Epidemic Prevention Cooperation Opportunity and Strategic Evaluation” project of the CDC was held as scheduled,

Reach 14 Countries (respectively Taiwan, China, India, Indonesia, Malaysia, Mozambique, Myanmar, Namibia, Philippines

Binh, Luanda, Pakistan, Thailand, Isopia, Uganda) 33 People attended and the participants were very active

Discuss and ask questions, and give feedback.

2. Participating in meetings and holding workshops in Thailand this time, and discussing follow-up plans related to the new southbound policy with Thai officials

Bilateral cooperation.

3. Meet with Ambassador Tong Zhenyuan of the Taiwanese Economic and Cultural Representative Office in Thailand to discuss possible future cooperation directions, and another ed

Team Leader Lai Brigitte provides in-depth suggestions on cooperation and exchanges with the Thai education system, all for the follow-up enrollment or cooperation and excha

Waiting is quite helpful.

Four, completion and Mahidol University level MoU Contract renewal, discussion of scholars' exchanges, etc., and the summer school is proposed in this visit

Discussion of cooperation and won Mahidol The support of the Dean of the University's School of Public Health expressed that he would do his best to assist the implementation

OK, can help recruit 20 A Thai student and subsidized air tickets, and the school subsidized board and lodging.

Mark. I look forward to the future exchanges of teachers and students between the two schools related to the New Southbound Project with Thailand's top allied schools.

Technical exchanges and cooperation.

附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: 執行處管理「防疫合作契機與策略評估」計畫 前往泰國清邁參與第九屆 TEPHINET Conference 會議及舉辦會前工作坊			
出國人姓名 ( 2 More than 1 Human representative)		職稱	服務單位
Guo Naiwen		Professor and Dean	Taipei Medical University
出國類別	<input checked="" type="checkbox"/> 考察 • Further study • the study • practice <input checked="" type="checkbox"/> 其他 • 國際會議 (例如國際會議 國際比賽 業務接洽等)		
出國期間: 106 year 8 month 4 Day to 106 year 8 month 9 day		報告繳交日期: 106 year 8 month twenty two day	
出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目	
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose" , "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad to share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:	
出國人簽章 Signature of the person going abroad ( 2 More than 1 people. Be able to 1 Human representative)		計畫主辦 機關 審核人	一級單位主管簽章 Signature of the supervisor 機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel

出國報告(出國類別:多訪)

赴越南廣寧省拜訪衛生廳長及省  
Visited the Minister of Health and the province in Quang Ninh Province, Vietnam CDC

服務機關:臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱:郭乃文院長  
Name and title: Dean Guo Nai Wen

派出國家:越南  
Country name: Vietnam

出國期間:106年8月19至20日  
Duration going abroad: 106-year 8 month 19 to twenty day

報告日期:106年11月16日  
Report date: 106-year 11 month 16 day

## 摘要

This time I went to Quang Ninh Province, Vietnam, the most important thing was to meet with three important people: the director of the Quang Ninh Provincial Department of Health, the director of the Xuan Dien Quang Ninh CDC director Dr. Van Chu Ninh And the director of Quang Ninh Province Thoracic Hospital Dr. Vu Duc Phan , Discuss TB Current status of prevention and control of dengue fever, future directions of cooperation with Taiwan and my country CDC Sign cooperation MoU The possibility.

## ~~1-Purpose and Content:~~ 目的及內容:

8 month 19 Day: journey, take a flight from Taipei to Hanoi, and then take a bus to Halong City

8 month 20 Day: Meeting with the director of the Quang Ninh Provincial Department of Health, the director of the disease control center, the director of the thoracic hospital and others

8 month twenty one Day: Journey, take a bus from Halong to Hanoi Airport, then take a flight to Taipei

Vietnam is the world twenty two One of the countries with many cases of tuberculosis, about 18 Million people are infected, of which 2 Ten thousand people

died, even higher than the death toll from traffic accidents. Statistics show that farmers are mainly infected with tuberculosis, accounting for 76% , Mainly due to the rural land

The living conditions in the district are poor, and the number of people receiving comprehensive treatment is quite limited. Central Farmers' Association has been established 57 Early

The nuclear and farmers' mutual assistance model should be strengthened in advocacy work to raise farmers' awareness of tuberculosis. 2010-2016 Quang Ninh Province Lung

Cure rate from 49% Rise to 55% , On average every year 1500 New cases, of which 500 To 700 For severe cases, the average age is 25-45 Young,

engaged in mining and fishery work. On average 40-50 One is MDR The patient currently has tuberculosis and thoracic hospital in the province 5 A MDR Inpatients.

The dengue fever epidemic in Vietnam mainly broke out in southern provinces and cities, of which Ho Chi Minh City had the most cases. Dengue fever was caused by abnormal weath

The large number of vector mosquitoes and poor public awareness of epidemic prevention have contributed to the warming of the epidemic. However, in recent years, the climate in Q

The number of fever cases tends to increase. Quang Ninh Provincial Department of Health 1957 Established an epidemic prevention unit in 1989 It was

restructured into Quang Ninh Province Preventive Medicine Center in the year, and a building will be built next year to establish Quang Ninh Province CDC .

Compiler 80 Person, physician 25 The nine major departments include: infectious diseases, occupational health, inspection, malaria fever, environmental sanitation, non-communicable

Product safety and health. The province CDC Have high interest in cooperation with Taiwan.

## ~~2-Expenditure and suggestions:~~ 心得及建議事項:

In this visit to Quang Ninh Province, Vietnam, the most important thing is to meet with three important people: the director of Quang Ninh Province Health Department Dr. Vu X

Dien Quang Ninh CDC director Dr. Van Chu Ninh And the director of Quang Ninh Province Thoracic Hospital Dr. Vu Duc Phan , Discuss:

(1) Vietnam TB Current status of prevention and control of dengue fever

(2) Future direction of cooperation with Taiwan — especially MDR TB The treatment, rapid screening of dengue fever and vaccines are of high interest.

(3) With our country CDC Sign cooperation MoU The possibility.

This time also finalized three Vietnamese foreign guests 10 Visited Taiwan at the beginning of the month, visited our school and the Department of Disease Control to discuss

The key country of our government's new southward policy, the cooperation with Quang Ninh Province of Vietnam deserves our continuous efforts.

# 附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: 赴越南廣寧省拜訪衛生廳長及省 Title of report abroad: Visit to the Ministry of Health and Provincial Health Department of Quang Ninh Province, Vietnam CDC				
出國人姓名 ( 2 More than 1 Human representative)		職稱	服務單位	
Guo Naiwen		Dean	School of Public Health, Taipei Medical University	
出國類別	• 考察 • 進修 • 研究 • 實習 • 其他: <u>參訪</u> (例如國際會議、國際比賽、業務接洽等) (Such as international conference, international competition, business contacts, etc.)			
出國期間: 106 year 8 month 19 Day to 106 year 8 month twenty one day			報告繳交日期: 106 year 11 month 16 day	
出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目		
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad and share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:		
出國人簽章 ( 2 More than 1 people Be able to 1 Human representative)		計畫主辦 機關 審核人	級單位主管簽章 Signature of the Unit Supervisor	機關首長或其授權人員簽章 Signature of the Head of the Agency or authorized personnel



出國報告 (出國類別：國際會議)  
Going Abroad Report (Going Abroad Category: International Conference)

馬來西亞第 5 屆亞洲健康減能研討會 拜會馬來西亞傳染病防治與全球衛生安全專家及官員  
Malaysian 5 Asian Health Awareness Symposium & Visit Malaysia  
Disease prevention and global health and safety experts and officials

服務機關：臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱：蔡奉真副教授  
Name and Title: Associate Professor Cai Fengzhen

派赴國家：馬來西亞吉隆坡  
Sending Country: Kuala Lumpur, Malaysia

出國期間：106 年 11 月 11 日至 15 日  
Going abroad: 106-year 11 month 11 to 15 day

報告日期：106 年 11 月 16 日  
Report date: 106-year 11 month 16 day

## Summary

My business trip to Malaysia this time has two main tasks: one is to implement the plan of the Disease Control

The prevention and control of infectious diseases in the country, especially Malaysia, and the visits and interactions with global health

Established a deeper cooperative relationship with the New Southward Countries in 1988 to warm up and prepare; the second series represents my country's deep writing and plays a

Asia Pacific Society of Public Health ( Asia-PacificAcademic Consortium for Public Health ) ,attend 11 month 13 , 14

Number at the University of Malaysia ( University of Malaya ) Held the first 5 Asian Health Awareness Symposium ( 5th AHLA CONFERENCE )

, As the speaker and as the reviewer of two oral reports.

## 1. Purpose and Content:

Malaysia's Global Health Security Officer Dr. Tam Jenn Zhueng Believing that Malaysia's progress in promoting global health security is slow, because various departments are not actively cooperating on global health issues, instead visiting Taiwan from their own Of observation experience, he believes that Taiwan is JEE The promotion and achievements on the forum are impressive, except for the experience sharing of the seminar In addition, the exchange of opinions within the CDC also made it believe that Taiwan's communication and cooperation between different departments is worthy of Malaysia. Sub-learning. in Dr. Tam Jenn Zhueng Based on the above understanding, he has a very positive and expectant attitude towards the future follow-up interaction and cooperation between Taiwan and Malaysia. He said that Malaysian government officials come to visit Taiwan and often receive comments from Chinese Concerned, but he believes that Malaysia still welcomes Taiwan's interaction and cooperation with it, and his suggestion is the most appropriate way Collaboration through academic research units, while universities in Malaysia have more frequent exchanges with scholars and officials. The situation of being transferred to a government official, so it thinks the most suitable school and field for this role. Therefore, it is recommended that our country's future We can continue to interact and cooperate with Malaysian universities to have more in-depth discussions with Malaysian global health and safety officials. Degree of interaction and cooperation.

I am also on this business trip to Malaysia. 11 month 13 Visit to the Director of the Department of Social and Preventive Medicine of the University of Malaysia Sanjay Rampal professor. Sanjay Rampal The professor's research expertise is infectious diseases, especially the epidemiological research and prevention and control policies of dengue fever. In addition to formulating policies for the prevention and treatment of dengue fever and other related diseases, the Malaysian Disease Control Unit also assists in organizing and Promotion of global health and safety. In person and Sanjay Rampal During the professor's dialogue and interaction, Sanjay Rampal The professor mentioned that global health security is an issue that Malaysia's disease control unit attaches great importance to, especially in terms of biosecurity. He believes that Malaysia needs more investment and development. I am understanding the recent expansion of the dengue fever problem in Malaysia. After the epidemic problem and the possible countermeasures proposed by Malaysia, I also shared with him the development of dengue fever in my country in recent years And the prevention and treatment situation, and expressed that my country is developing a dengue vaccine and has entered the stage of clinical trials. I hope that the dengue vaccine will contribute to the control of dengue fever in our country, and I also hope that this vaccine can be introduced into Southeast Asia The country assists Southeast Asian countries in the prevention and treatment of dengue fever. Sanjay Rampal Upon hearing this, the professor said I am looking forward to the launch of this vaccine, and believe that the launch of this vaccine should contribute to the control of the dengue fever epidemic. Come to carry out relevant cooperation and research with Taiwan, and also expressed a high degree of willingness.

I am 11 month 13 Daily visit to the director of the Department of Social and Preventive Medicine of University of Malaysia Sanjay Rampal Professor, also took the opportunity to participate in the Asian Health Awareness Symposium country Mahidol University (Ma Xidou University) New Dean of the School of Public Health Chanuantong Tanasugarn teach To interact with Mahidol There is a deep foundation for interaction and cooperation between universities. More in the month Mahidol As a guest professor at the university for one month, on this basis, I and Mahidol Big Dean of School of Public Health Chanuantong Tanasugarn The interaction of professors, in addition to enhancing the foundation of cooperation between the two universities, To discuss more in-depth issues. Thailand has always been a center of global health in Southeast Asia. Mahidol the University World Health Organization WHO The object of long-term cooperation, world-renowned universities, such as London University of Tropical Medicine

( London School of Hygiene and Tropical Medicine ) Also has a deep research cooperation foundation with the school.

I and Chanuantong Tanasugarn The dean exchanged opinions on how Taiwan and Thailand can interact and cooperate more deeply in the future. Chanuantong

Tanasugarn The dean informed me that the London University of Tropical Medicine

The way of renting offices in Mathidou University for many years has allowed the researchers in his school to travel in the southeast in his own way.

Asia conducts in-depth research cooperation, and also conducts in-depth interaction and cooperation with Thai government officials. Many Thai infectious

There are traces of foreign scholars' intervention in disease research and policy, which can be carried out through this method. Maybe not

If you come to our country, you can also consider this way to cooperate with Thailand or other Southeast Asian countries in the prevention and control of infectious diseases and g

Part, for more in-depth understanding and cooperation. In addition, I also acted as an oral presentation in the conference today

The judges assist the conference in scoring the oral report contest.

11 month 14 Today, on behalf of the Asia-Pacific Society of Public Health, I will participate in the Global Health Seminar on Global Health

Diplomacy ( Global Health Diplomacy ) As the topic, give a lecture, and use the infectious disease pandemic

Take the issue of global health diplomacy and the development and heating of the issue of global health security as an example.

The participants in the seminar can better understand the important role played by the prevention and control of infectious diseases in today's global health environment, and

The development and importance of global health security issues. In the planning agenda of the seminar, I will be

Any reviewer of the oral report session will assist the conference in scoring the oral report contest. Final assembly

The best oral report award was awarded by a postdoctoral researcher from Vietnam who is now working as a postdoctoral researcher at our school (Taipei Medical University)

Tuyen Van Duong I was awarded a Ph.D., and it was an oral report made in the session I reviewed, so I am honored.

In addition, I also contacted the Department of Social and Preventive Medicine of the University of Malaysia on that day ( Department of Social &

Preventive Medicine ) Middle Population Health Center ( Centre for Population Health ) Director Tin Tin Su

Professor and Yut Lin Wong Interact and discuss how to strengthen the cooperation between Taiwan and Malaysia in various aspects in the

future.



## 2- Experience and suggestions: 心得及建議事項:

On the whole, the promotion of global health and safety work and the promotion of my country's new southward policy are extremely dependent on The establishment and development of academic platforms, and the internationalization of universities is the current trend. The original foundation for internationalization of the university. Actively expand the important cornerstone of my country's international participation and visibility. Under the current active promotion of my country's southward policy, I myself Visited Malaysia for the second time and played an important role on behalf of our school. Asia-Pacific Academic Consortium for Public Health ) , Attended the University of Malaysia ( University of Malaya ) So The seminars held, the work of the speakers and reviewers, this itinerary, It is the best testimony to show that my country is actively establishing cooperative relations with south-facing countries and the strength and influence of our school's international At the same time, the importance of our school in my country's participation in the global health network will also be through this exchange of scholars. And more strengthened.

In addition to assisting the disease control agency's plan this time, I also visited Malaysian global health officials and important scholars, Participated in the seminar as a speaker and reviewer, and took this opportunity to cooperate with Malaysia's global health and infectious disease prevention and control leaders Important scholars in the field discussed research cooperation matters and obtained concrete results. In addition to increasing the school's global The visibility of the development in the field of health and health safety enables the international community to understand and understand the global health and In addition to the development and prospects in the field of health security, but also because of more close contacts and exchanges with scholars in the field of global health security For the future research and development of myself and our school in the field of global health and safety, a deeper foundation will be laid.

# 出國報告審核表

出國報告名稱: 馬來西亞第 屆亞洲健康識能研討會 拜會馬來西亞傳染病防治與全球衛生安全專家及官員				
出國人姓名 ( 2 More than 1 Human representative)		職稱	服務單位	
Cai Fengzhen		Associate Professor	Master's Program in Global Health and Development, Taipei Medical University	
出國類別	• 考察 • Further study • the study • practice • 其他 國際會議 (例如國際會議 國際比賽 業務接洽等) • Other international conferences (Such as international conference, international competition, business contacts, etc.)			
出國期間: 106 year 11 month 11 Day to 106 year 11 month 15 day			報告繳交日期: 106 year 11 month 16 day	
出國人員 自我檢核	計畫主辦 機關審核	審	核	核
		Examine	clear	Item
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:		
出國人簽章 ( 2 More than 1 people, Be able to 1 Human representative)	計畫主辦 機關 審核人	第一級單位主管簽章 Signature of the first level supervisor	機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel	

出國報告 (出國類別: 多訪)  
Going abroad report (going abroad category: visit)

執行疾管署「防疫合作契機與策略評估  
Implementation of the CDC's "Epidemic Prevention Cooperation Opportunities  
估計"計畫 前往越南廣寧省及河內拜會  
"Estimated" plan to visit Quang Ninh Province, Vietnam and Hanoi  
相關單位  
concerned department

服務機關 臺北醫學大學  
Service Organization Taipei Medical University

姓名職稱 邱正文教授兼主任 邱弘毅教授兼主任 黃麗玲助理教授  
Name and Title Professor Yawen Qiu and Director, Professor Hongyi Qiu and Director, Assistant Professor Li Ling Huang  
越南籍博士後研究員  
Vietnamite Postdoctoral Researcher

派赴國家 越南廣寧省、河內  
Country/Region: Quang Ninh Province, Vietnam & Hanoi

出國期間 broad: 106 年 11 月 19 至 twenty four 日  
Duration of going abroad: 106 year 11 month 19 to twenty four day

報告日期 106 年 11 月 30 日  
Report date 106 year 11 month 30 day

## 摘要

Professor Yawen Qiu, Professor Hongyi Qiu and Assistant Professor Huang Liling, for the implementation of the "Epidemic Prevention Cooperation Opportunity and Strategic Evaluation" project, visited Quang Ninh Province Health Department, Quang Ninh Province Health Department Preventive Medicine Center, Quang Ninh Province Tuberculosis and Cavity Hospital, Hanoi Medical University, Hanoi Public Health University, Vinmec International Hospital And visit Vietnam Ministry of Health officials Dr. Vu Ngoc Long .



#### 1. Purpose and Content:

11/19(Sun.)

Depart for Taoyuan International Airport in the morning, 11 Arrive at Noi Bai Airport in Vietnam, and will be sent to Quang Ninh Province Health Department

The director arranges for a car to go to the hotel in Quang Ninh Province to leave luggage, take a break and proceed to the next day before the trip

In the evening, by the director of Quang Ninh Provincial Health Department Dr. Vu Xuan Dien Host the exchange welcome dinner.

11/20(Mon.)

Go to the Preventive Medicine Center of Quang Ninh Provincial Department of Health the next morning ( Quang Ninh Preventive

Medicine Center) , Conduct disease control, prevention and diagnosis meetings, and conduct disease control systems and other software and hardware

Visit by the director of Preventive Medicine Center Dr. Ninh Van Chu ,deputy director Mr. Nguyen Manh Tuan Advance

Brief introduction of the organization structure and main objectives and tasks of the Center, and accompanying visits and explanations. Quang Ninh Provincial Department of

Establish an epidemic prevention unit, 1989 It was restructured into Quang Ninh Province Preventive Medicine Center in the year, and a building will be built next year to est

province CDC . Compiler 80 Person, physician 25 People, nine major departments include: infectious diseases, occupational health,

inspection, malaria fever, environmental sanitation, non-communicable diseases, planning, outpatient clinics, school hygiene, food safety

health. It became a national epidemic prevention standard unit last year, and was certified by the Ministry of Health and other relevant government departments as the most

A good health unit has no major epidemics in recent years. The Preventive Medicine Center of Quang Ninh Provincial Health Department is run by the Ministry of Health,

The laboratories designated by the Ministry of Industry and Trade, the Ministry of Natural Resources and Environment, and the Ministry of Agriculture and Rural Developmen

Enhancing the use of science and technology in professional work and computerizing the center's operations: Molecular biology in disease diagnosis

Applications in high-tech machinery, water quality testing, food and environmental applications, etc. The laboratory level is also

Yes ISO 17025-2005 with ISO 15189-2012 .

After actually visiting the center to test the system, Professor Hongyi Qiu expressed his professional ability and modern technology

Highly appreciated, and said that our school should further develop and plan for academic exchanges with Quang Ninh Province Preventive Medicine Center.

Xinxin sent staff to Taiwan to learn professional knowledge and skills in this field, such as disease prevention, especially diagnosis of community diseases

Detection, prevention and control field. And hope to strengthen cooperation and training in the field of food testing.

The planned projects to be implemented by the Department of Management in the future will also be implemented in Quang Ninh Province. Proposed for Quang Ninh Provin

Hope taiwan CDC The direction of assistance and cooperation that can be provided in the prevention and control of infectious diseases and other health concerns

as follows:

- Infectious disease prevention and research: The Director of Health of Quang Ninh Province hopes to cooperate with Taiwan to learn more.

Established by the university email Pipeline connection to Taiwan CDC Learn from practical experience in infectious disease

diagnosis, epidemiological monitoring, epidemic forecasting and emergency response measures.

- Short-term training research: In case of practical research problems, the Director of Health of Quang Ninh Province hopes to use emails consult Taiwan's academic circles and health departments, the Ministry of Health plans to send doctors or public servants to Taiwan for acceptance 1-2 Months short Period of training or study for a master's degree program, learning to use advanced laboratory equipment to learn to solve health diseases and Prevention and other related issues (currently delivered 30 Doctors receive cancer treatment and obstetric hygiene in Taiwan Training), looking forward to improving the level of research and practical experience of medical staff, and also hope to invite Taiwanese scholars came to Quang Ninh Province Health Department to jointly study the health problems in Quang Ninh Province.
- Vaccine safety control issues: ( 1) Want to know how Taiwan implements its vaccine expansion plan EPI (Expanded Program on Immunization) . ( 2) In Quang Ninh Province 9 and 18 Sanhe at the age of months One MMR , But occasionally measles cases will occur in 7 Infants and toddlers who are months old or younger, ask if they should Change the vaccination time and arrive earlier 7 Vaccination at months old. Similar conditions are also seen in mumps, Germany measles. Quang Ninh Province has a low rate of vaccination.

Power experience. ( 3) The director of Quang Ninh Province Preventive Medicine Center pointed out that in Quang Ninh Province, there are two kinds of children My parents did not get vaccinated, and the child got sicker, but the mother got vaccinated but still got sick.

If her child is sick, his condition is relatively mild. The two sides made progress on vaccine efficacy and virus mutation issues Professor Qiu Hongyi and Professor Qiu Yawen gave suggestions and promised to discuss the problems they need to solve first.

Questions and assistance to pass to Taiwan CDC Director Zhou Zhihao, hope 12/6 Director Zhou Zhihao was able to provide relevant answers and solutions when he visited Quang Ninh Provincial Health Department.
- Food poisoning: Food poisoning and food safety and sanitation are important hygiene issues in Quang Ninh Province. Quang Ninh Province prevents The medical center urgently needs assistance in establishing best practices that can confirm the cause and source of the infection. Currently Quang Ninh Province The preventive medicine center uses traditional investigations (such as bacterial culture), and often people are infected with parasites or food Poison, the source of infection cannot be found. I hope to learn the new methods for rapid diagnosis of the source of infection, because Quang Ninh Province is The mass poisoning that occurs in the district is often a serious problem on a large scale.

High pressure requires the diagnosis of the cause or source of infection in the shortest time. Hope taiwan CDC Can be used in the future email Share new knowledge and related experience with Quang Ninh Province Preventive Medicine Center. Quang Ninh Provincial Health Department can And Taiwan CDC Sign memo MoU , Willing to send personnel to Beijing Medical University to study and train at their own expense, the Department of Health also hope to learn about the prevention of non-communicable diseases and the medical insurance system, Professor Hongyi Qiu and Professor Yawen Qiu promised to introduce Taiwan National Health Administration, National Health Insurance Agency and Food and Drug Administration to Quang Ninh Province Department of Health
- Electronic Medical Record System ( EMR ) Isotope medical and health services ( Telemedicine ): TMU For Taiwan

The Electronic Medical Record System Research Center can provide relevant information technology training in Quang Ninh Province.
- Regional cooperation: I hope that in the future, through the international cooperation network of Beijing Medical University, we will cooperate with other countries in the

Canada, Malaysia, etc. share medical and health experience and provide solutions to jointly fight against Zika virus, Mers-

Cov And other emerging infectious diseases.

The recommendations of Professor Hongyi Qiu and Professor Yawen Qiu to Quang Ninh Preventive Medicine Center include: RT-PCR Quick check  
Experience and safety control system of "origin to table" increases the vaccination rate (tracing by primary medical personnel) and reduces  
Source of contact (siblings), TMU The attached hospital provides a fee schedule for short-term training and training, and invites the Ministry of Health  
Send staff to participate next year TMU International Conference on Infectious Diseases organized by the National Health Program.

After finishing the visit to the Preventive Medicine Center, head to Quang Ninh Province Tuberculosis and Thoracic Hospital ( TB  
and Lung Hospital) And the Department of Health to visit, tuberculosis and thoracic hospital, 1964 year 12 In accordance with the  
decision of the Vietnam Health Department, the predecessor of the hospital was established as a tuberculosis clinic. 1967 year 4 In  
May, with the development of tuberculosis in mountainous areas and remote ethnic minority areas, Quang Ninh Province People's Committee believed that Quang Ninh Pro  
hospital. Merged with 2002 year 2 month 19 It was decided to change the name of Quang Ninh Tuberculosis Center to Quang Ninh  
Tuberculosis and Thoracic Hospital.

First, the director of tuberculosis and thoracic hospital Dr. Phan Vu Duc The briefing stated that the tuberculosis and thoracic hospital is  
a provincial second-level specialist hospital. 336 Opening a bed mainly prevents and treats lung diseases such as tuberculosis, lung obstruction, and asthma.  
2010-2016 The cure rate of lung diseases in Quang Ninh Province has increased from 49% Rise to 55% , On average every year 1500 New  
cases, of which 500 To 700 For severe cases, the average age is 25-45 Young, engaged in mining and fishery work. On average 4050  
One is MDR The patient is currently in the tuberculosis and thoracic hospital 5 A MDR patient. Tuberculosis in Quang Ninh Province  
MDR 'S treatment is an important issue. CDC Cooperation and assistance in treatment MDR of TB disease  
Suffer. Currently not used in Quang Ninh Province Bedaquiline Drugs, other provinces are on trial. If you want to accept  
Taiwan CDC of Bedaquiline Medicine, Director of Tuberculosis and Thoracic Hospital of Quang Ninh Province Dr. Phan Vu Duc  
Said that it was necessary to write a report to ask the global conference ( Global Fund) To decide whether  
This medicine can be used. It is expected that Quang Ninh Province will also start the trial next year Bedaquiline .

11/21(Tues.)

On the morning of the third day, the director of Quang Ninh Provincial Health Department arranged cultural exchanges and visits in Quang Ninh Province.  
And received a visit to the Preventive Medicine Center yesterday, which has been published in the local newspaper.

11/22(Wed.)

In the morning, take a ride to the hotel where you are staying in Hanoi, take a break and prepare for your visit to Hanoi.  
Lunch with a Vietnamese postdoctoral researcher in the School of Public Health Dr. Duong Van Tuyen Rendezvous by Dr. Duong Van  
Tuyen Lead the Hanoi cultural exchange and visit itinerary.

11/23(Thur.)

In the morning, go to Hanoi Medical University ( Hanoi Medical University; HMU) Meet the Director of International Cooperation

Office A/Prof. Ha Phan Hai An And International Cooperation Office experts Ms. Hoang Dieu Linh , Hanoi Medical University

Learn from 1902 In 2015, it was one of the famous century-old universities in Vietnam.

To improve human health, science and technology, and cultivate health care for the country for a long time.

Department experts and leaders. Ministers and officials of the Ministry of Health and public officials at all levels of health departments are almost HMU

Graduated alumni.

First, Professor Hongyi Qiu introduced the Taipei Medical University and the affiliated hospital system, and mentioned that he and Professor Qiu Yawen respectively

Served as the Asia-Pacific Public Health Academic Alliance ( APACPH ) Vice President of Finance and Regional Director of Taiwan, later, Qiu Ya

Professor Wen said in the past 2 Years not seen HMU Attend the annual meeting of the Asia-Pacific Public Health Academic Alliance, International Cooperation Office

long A/Prof. Ha Phan Hai An In response, I am happy to see that the School of Preventive Medicine and Public Health of Hanoi

Medical University has returned to the Asia-Pacific Public Health Academic Alliance. Professor Qiu Yawen will provide the latest alliance activities and contact information of

Report to the Dean of the School of Preventive Medicine and Public Health. Also introduced by Professor Qiu Yawen from Taipei Medical University including

Global health and more 18 A full English program, A/Prof. Ha Phan Hai An I am also highly interested in the short-term training courses

provided by Taipei Medical University and hospitals for students and doctors, and asked about the relevant course fees. Think vietnam

It is highly feasible for public health students to come to Taipei Medical University to take short courses, but medical and nursing students hope

Have clinical experience in direct contact with patients. A/Prof. Ha Phan Hai An He is the director of the Department of Nephrology and

Dialysis, and he pays special attention to the phenomenon of kidney dialysis performed by Taiwan Goldman Sachs, and is related to early diagnosis and control by Professors

Questions are discussed. Both sides HMU Future participation TMU Provide short-term courses and establish research partnerships,

and reach a consensus through school-level signing MoU After starting the exchange, they will sign at the college level MoU Cooperation.

Later, went to Hanoi University of Public Health ( HUPH ) Call on the Director of the Department of External Relations and Cooperation Dr. Nguyen

Ngoc Bich , Hanoi University of Public Health ( HUPH ) Formerly 1976 The School of Health Management (now Hanoi School of Public

Health) was established in 1999. Its important responsibility is to train all levels of health managers in the Vietnamese public health sector

member.

1990 In the same year, the Public Health School was established in the School of Health Management, Department of Hygiene and Epidemiology and Health

Health Manpower Center (now Institute of Health Strategy and Policy- HSPI ) Consists of three parts. The public health

The college office is located in the School of Health Management. Same in 1990 In 2016, the school joined the Asia-Pacific Public Health Academic

Alliance APACPH ) , With the qualifications of the University of Public Health. 1995 The Ministry of Health of Vietnam

The urgent need to establish public health training institutions decided to focus on strengthening schools, especially human resource development

Capacity building. The Ministry of Health provided support to the school. Since then, staff have been recruited and sent to Los Angeles

Kefeller Foundation ( RF ) And the New York Chinese Medical Council ( CMB ) Core training under the funded program

Training. 2001 year 4 month 26 Day, the Hanoi School of Public Health was established ( HSPH.)While in 2016 year 10 month,

The school officially changed its English name to Hanoi University of Public Health ( HUPH ) .

Professor Hongyi Qiu and Professor Yawen Qiu and Hanoi University of Public Health Dr. Nguyen Ngoc Bich Introduce the current

situation and development of the teaching and research system of their respective universities, and agree with each other in the future in short-term training, teacher-student

There is great room for exchange and cooperation with practice. Both sides HUPH with TMU Master's Program in Global Health and Development

Jointly set up a multinational or unilateral dual education system to discuss, think it has a high feasibility, post-doctorate research

member Dr. Duong Van Tuyen Also means HUPH Since this year, I have been actively seeking cooperation partners in Taiwan.

TMU Will be its first choice. In addition to the Global Hygiene Program, both parties agree that the Master of Nursing Program is another

**A bilateral cooperation development direction, and at the same time in the future**

Tobacco hazard prevention and control research team led by Professor Qiu Yawen and assistant to Huang Liling, a tobacco hazard communication expert in the National Health

Professor, conduct cooperation and exchanges, and the two sides reached a consensus on continuing to discuss and develop this cooperative relationship. In addition, Qiu

Professor Qiu Yawen and Professor Qiu Yawen in the Asia-Pacific Public Health Academic Alliance ( APACPH ) Vice President of Finance and serving as Taiwan

Regional director status, invitation HUPH Participate in next year's 50 Annual meeting and business meeting, will invite APACPH the Lord

Xi and the Secretary-General HUPH Letter from the representative, Director of the Department of External Relations and Cooperation Dr. Nguyen Ngoc

Bich Means HUPH Regular participation APACPH Meeting, the new campus can provide the future APACPH year

The venue for the meeting, willing to act as a window to help promote HUPH More active participation APACPH .

The third itinerary is to Vinmec International Hospital ( Vinmec International Hospital; VIH ) See

visit, VIH in 2012 year 1 month 7 Established in Japan by a leading private enterprise in Vietnam Vingroup The health care brand

invested and developed to cultivate Vinmec Medical staff in the hospital system, planning to 2019 Established the affiliated hospital

system in Vinmec University of Health Sciences. First of all VIH The hospital manager led us to visit the hospital environment, equipment,

The operation mode of emergency department, outpatient department and inspection department, by Vinmec Director of the Preparatory Program of the University of Health

Le Cu Linh briefing Vingroup with Vinmec Director of the Department of Nursing Education, Hospital System Dr. Yvonne

Osborne It is to illustrate nursing clinical research and teaching, and TMU The two parties exchanged and discussed the current status

and development of the medical research system in their respective hospitals. At the same time, Professor Hongyi Qiu and Professor Yawen Qiu discussed TMU Attached

It belongs to the hospital system and the university to share experience in overall planning, operation and development, and is willing to provide Vinmec Hospital system

With the assistance of universities, both parties are happy to see short-term training courses for medical personnel and medical and health research and teaching in the future

Establish a cooperative relationship for consultation and exchange.

In the evening with officials from the Ministry of Health of Vietnam Dr. Vu Ngoc Long To communicate with each other, Dr. Vu Ngoc Long

Yes IHR and GHSA Representative of Vietnam, last year 11 Complete Vietnam at the end of the month JEE Report, responsible Roadmap

The author of the plan. Professor Qiu Yawen and Dr. Vu Ngoc Long Regarding Vietnam and Taiwan's participation in international epidemic prevention

Current situation and development, share experience and discuss, have a high degree of consensus on the development of cooperation between the two parties, and continue

To develop this partnership. Dr. Vu Ngoc Long Mention ASEAN lack of funds, Global Fund Aid Vietnam

The five-year epidemic prevention plan is about to expire, and Vietnam has already separated from low-income countries, Global Fund Will terminate

Cooperation with Vietnam, Professor Qiu Yawen asked Dr. Vu Ngoc Long And Taiwan CDC Develop bilateral cooperation space for

epidemic prevention, Dr. Vu Ngoc Long Very much agree with Taiwan CDC The role of epidemic prevention can be targeted at TB , AIDS

, Malaria, dengue fever and other epidemic prevention issues and establish bilateral cooperative relations with Vietnam. Dr. Vu Ngoc

Long Said that dengue fever is a key task of the infectious disease department of the Ministry of Health of Vietnam. 7 to 10 10,000

clinical cases (diagnosed by non-specimen). TB , Malaria is also one of the important infectious disease control tasks. Dr. Long

Willing to introduce the main person in charge to Taiwan CDC And suggest ways to contact the Ministry of Health of Vietnam: and Dr.

Long Can be directly email Contact the Ministry of Health of Vietnam and suggest Taiwan CDC It is contacted by formal letter, and the

Ministry of Health arranges related departments to contact Taiwan CDC Discuss cooperation on health issues.

11/24(Fri.) Depart from the airport in the morning and return home.

## ~~2. Experience and suggestions:~~ 二、心得及建議事項：

### 1. This plan will be implemented in Quang Ninh Province.

Fang agrees that Quang Ninh's Department of Health can compete with Taiwan CDC Sign the memorandum MoU After that,

you can send staff to Taiwan CDC get on 2-4 Week short training. 2. Our school TMU It should be further developed to conduct

academic exchanges with Quang Ninh Preventive Medicine Center, and the center will send personnel

Come to Taiwan to learn professional knowledge and skills in this field, such as disease prevention, especially diagnosis and testing of community diseases

Monitoring, prevention and control field. And hope to strengthen cooperation and training in the field of food testing and provide short-term training

Practice further education.

Three, suggest Taiwan CDC Future use email Share new knowledge and related experience with Quang Ninh Province Preventive Medicine Center

Test. Quang Ninh Provincial Department of Health is willing to send staff at its own expense TMU Learning training, the Ministry of Health also hopes to learn

Prevention of non-communicable diseases and medical insurance system, TMU Promise to introduce Taiwan's National Health

Drug Administration to Quang Ninh Provincial Department of Health and Preventive Medicine Center.

4. Invite the Department of Health to send personnel to participate next year TMU The International Conference on Infectious Diseases organized by Professor Qiu Yawen from

Fives, AMR Yes ASEAN Important national issues, Taiwan can use APACPH , With its member countries

Singapore, Malaysia, Thailand, and Hong Kong have jointly cooperated in epidemic prevention and research.

6. Officials from the Ministry of Health of Vietnam have a high degree of consensus on the development of cooperation between the two parties, suggesting that Taiwan CDC

Contact the Ministry of Health of Vietnam, and the Ministry of Health will arrange for relevant departments to contact Taiwan CDC Discuss health issues

Cooperation.

Seven, Global Fund The five-year anti-epidemic plan to assist Vietnam is about to expire, and Vietnam has left low-income countries

Family, Global Fund Will terminate cooperation with Vietnam, suggest Taiwan CDC Can take this opportunity to target TB , AIDS ,

Malaria, dengue fever and other epidemic prevention issues and establish bilateral cooperative relations with Vietnam.

8. Representatives of universities and hospitals agreed with TMU Cooperate on training projects, research and exchange projects.

Hanoi Hospital and University Hope TMU Able to provide: ( 1) Detailed research and training cooperation plan, ( 2) near

Visit and sign a memorandum of understanding, ( 3) help Vinmec International hospitals improve clinical skills and technology,

(4) assist Vinmec International Hospital is Vinmec University of Health Sciences 2019 The establishment and operation of the year are accurate

Prepared, ( 5) in TMU Short-term course training courses, exchange courses, double master/doctoral training are offered on campus

Courses, sandwich training courses, and master/doctoral training courses.

9. Quang Ninh Provincial Department of Health, University and Vinmec International hospitals want to know about the short-term training and degree courses

Cost, it is recommended TMU And Taiwan CDC Able to provide various cost schedules for related courses.

Summarizing this trip to Vietnam, no matter in academic cooperation, government connection, and southbound regional network, there are

With specific progress, there will be more room for international cooperation in the future.

# 附件一

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: 執行處管署「防疫合作契機與策略評估」計畫 前往越南廣寧省及河內拜會相關單位  
Title of report: Implementing the evaluation of opportunities and strategies for cooperation in Epidemic Prevention and Control, visiting Quang Ninh Province and Hanoi, Vietnam

出國人姓名 ( 2 More than 1 Human representative)	職稱	服務單位
Qiu Yawen	Professor and Director	Taipei Medical University

出國類別	考察・進修・研究・實習 Other visits and study・research・practice 其他・參訪及計畫推廣 (例如國際會議・國際比賽・業務接洽等) Others (Such as international conferences, international competitions, business contacts, etc.)
------	--

出國期間: 106 year 11 month 19 Day to 106 year 11 month twenty four day	報告繳交日期: 106 year 11 month 30 day
---	----------------------------------

出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> <li>•</li> </ul>	1. Submit the report of going abroad according to the limit 2. Complete format (this article must have "purpose", "process", "Experiences and Suggestions") 3. No plagiarism related information 4. Full and complete content 5. Suggestions have reference value 6. Send this agency for reference or research 7. Send it for reference 8. Returned for correction, reason: ( 1 ) Does not comply with the original approved plan for going abroad ( 2 ) Written in a foreign language or only based on the collected foreign language materials ( 3 ) The content is empty and brief or does not cover the required items ( 4 ) Plagiarizing all or part of the relevant information ( 5 ) Citing relevant information without indicating the source ( 6 ) The electronic file is not processed in accordance with the format 9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication: ( 1 ) Handling the seminar (information meeting) of the agency's report abroad and share knowledge with colleagues. ( 2 ) Submit a report to the agency's business report ( 3 ) other _____ 10. Other handling opinions and methods:

出國人簽章 ( 2 More than people, Be able to 1 Human representative)	計畫主辦機關 審核人	服務單位主管簽章	機關首長或其授權人員簽章



# 附件二



\* 圖：〔左起分別為邱亞文教授、廣寧省衛生廳廳長、邱弘毅教授、黃麗玲助理教授〕  
Figure. [The six in order from left are Professor Qiu Yewen and Director of Quang Ninh Provincial Health Department Dr. Vu Xuan Dien, Professor Hongyi Qiu, Assistant Professor Liling Huang]



\* 圖：〔於廣寧省衛生廳與廳長合影〕  
Figure. [at Quang Ninh Provincial Health Department and Director Dr. Vu Xuan Dien group photo]



\* 圖. [廣寧省衛生廳預防醫學中心] Province Health Department]



\* 圖. [左四為廣寧省預防醫學中心主任] Dr. Ninh Van Thanh ]



\* 圖, [[右五越南廣寧省肺結核暨胸腔醫院院長 Quang Ninh Province, Vietnam] Dr. Phan Vu Duc ]



\* 圖, [[邱弘毅教授與 院長進行交流討論]]





\* 圖 [多訪廣東省預防醫學中心報導截圖] Picture [Screenshot of the Guangdong Provincial Preventive Medicine Center]



\* 圖 [與越南衛生部官員 Health of Vietnam Dr. Vu Ngoc Long 餐敘合影] Picture [Dinner with officials of the Ministry of Health of Vietnam Dr. Vu Ngoc Long]

出國報告 (出國類別：多訪)  
Going abroad report (going abroad category: visit)

郭乃文院長前往印尼日惹  
Dean Guo Naiwen went to Yogyakarta, Indonesia- University of Alma

Ata (UAA) Exchange  
交流訪問

服務機關：臺北醫學大學  
Service Organization: Taipei Medical University

姓名職稱：郭乃文院長、陳再晉副主任、陳冠文辦事員  
Name and Title: Dean Guo Naiwen, Deputy Director Chen Zaijin, Clerk Chen Guanwen

派遣國家：印尼日惹 (Yogyakarta)

出國期間：106 年 11 月 29 日至 12 月 02 日  
Going abroad: 106 year 11 month 29 to 12 month 02 day

報告日期：106 年 12 月 05 日  
Report date: 106-year 12 month 05 day

## 摘要

Dean Guo Naiwen and Deputy Director Chen Zaijin commissioned the School of Public Health for the Department of Disease Control of the Ministry of Health and Welfare to be the host and co-host of the "Epidemic Prevention Cooperation Opportunity and Strategic Evaluation Plan", according to the specifications of the plan. Please, go to Yogyakarta, Indonesia- University of Alma Ata (UAA) Exchange visits, lectures, roundtable discussions. Talking about signing the letter of intent for cooperation.

1. Purpose and Content:

11/29 (three):

This morning 7 At half past half, meet with Director Chen Zaijin at Taoyuan Airport, fly to Jakarta, Indonesia and transfer to Yogyakarta.

About local evening 7 Arrive at Yogyakarta Airport, then with UAA Reception colleagues Mr. Sofyan with Mr. Chahya

Meet and confirm arrival the next day UAA The speech time and related preparation matters.

11/30 (four):

morning 9 Point arrival UAA By the principal Prof. Hamam Hadi With the vice principal Siti Nurunyah Reception, Yu Yan

Before the lecture, the principal will introduce local health officials, medical institutions, etc. 17 Representatives, including health officials from neighboring provinces and districts

Staff, physicians and nursing staff in public medical institutions responsible for the prevention and treatment of infectious diseases.

10 Point to start Guest lecture By the principal After giving a speech and introducing the current situation of local dengue fever and tuberculosis, Director Chen Zaijin gave two keynote speeches, the topics are:

One, Strengthening the Health Care System toward Health for All - Lessons from Taiwan

Director Chen introduced Taiwan's health care system, from strengthening the health administration system, establishing laws and regulations, and comprehensive public Health service measures, popularization of high-quality medical services, manpower development, sound financial and referral and service delivery systems, etc.

In order to explain Taiwan's successful model one by one, the participants listened attentively and asked questions enthusiastically.

two, Prevention and Control of Tuberculosis and Dengue Fever in the Era of Globalization -Experience of Taiwan

In the prevention and treatment of tuberculosis and dengue fever, Director Chen has three aspects: case prevention, case discovery, and case management

Cut in, introduce traditional and innovative prevention measures, whether it is the simplest personal or environmental hygiene, or advanced inspection,

Inspection and quarantine technology and integrated environmental, chemical, and biological control laws to reduce vector mosquitoes, supplemented by information and commun

Case treatment and epidemic surveillance mechanism, border control, and the research and development results of dengue fever vaccine in my country, etc.,

Extensively discuss Taiwan's experience in a profound and simple way; also share with my country 2005 Tuberculosis implemented in 2010 halved in ten years

Plan and expand the effectiveness of the treatment of latent tuberculosis infection, and join WHO 2035 After the tuberculosis elimination plan, adopt

Strategic measures and expected goals. In addition, from the perspective of globalization, the

The facts in the fields of industry, academic exchanges, trade, etc. are closely exchanged, discussing the importance of joint prevention in infectious disease control areas, citing

Disseminate the audience's global health and safety awareness and lively discussions.

After the speech, the principal arranged for the school teacher and the supervisor of the medical and health institution responsible for the prevention and control of infection

Round table discussion, relevant personnel have a strong interest in the isolation of patients in our country, the establishment of laws and regulations, and the difficulties they may

With regard to concerns, Director Chen responded in detail one by one. Many people expressed their strong desire to exchange and study with my country.

at night 7 Meeting with Dean Guo of the School of Public Health and Inviting UAA Principals, heads of local health institutions,

representatives of public hospitals, etc. will have dinner to discuss future cooperation between my country and Indonesia, and UAA Principal to Taipei Medical University

Preliminary plans for exchange visits are planned, and a closer cooperation relationship is expected in the future.

12/01 (Five):

Today's itinerary is for participation UAA The second anniversary of the school, and signed TMU versus UAA Willingness to cooperate book. Before the school celebration ceremony, the principal introduced the consultant of the Indonesian Ministry of Science and Technology Research and Higher Education (form Wahid Maktub And the Department of Higher Education Quality of the Ministry of Education Prof. Aris After getting to know our side, Dean Guo and Director Chen exchanged discussions on health and higher education policies, international cooperation and other matters, and had a very happy conversation.

9 Time to 12 When, by the principal Prof. Hadi The speech opened the prelude to the school celebration, the principal mentioned UAA In the future, other hinterlands have been purchased to build hospitals and expand the school. In addition to providing students with an excellent educational environment, they also belong to the school's hospital internship, strengthen practical experience, and gradually move towards a first-class university in Indonesia, and hope to graduate from the school. Nursing staff can move towards internationalization and perform nursing business all over the world. UAA The vision of the leader, and The development potential of the school.

In the speech after Dean Guo and the principal signed the letter of intent to cooperate, he highly praised the principal's school management philosophy and affirmative leadership. The school's development potential, invite the principal to visit Beijing Medical University in January and February next year, and look forward to more students from the two schools Exchanges.

at night 7 At that time, the principal invited our party and the English teachers of the school to discuss the itinerary plan for future visits to the station. During the meeting, both parties further discussed and finalized the exchange of students 2018.02 Before the end, the principal will lead two faculty positions Members visited the School of Public Health, established the School of Public Health and UAA A good bridge of cooperation, draw a perfect sentence for this line Point, visit colleagues at 12/02( 6) Transfer from Yogyakarta to Jakarta.

※ Please see the attachment for the list of attending VIPs and key photos.

#### 心得及建議事項 Experiences and suggestions

During this visit, through the principal Prof. Hadi Introduce and get to know the heads and high-level supervisors of important local health and medical institutions. They express a high degree of willingness to exchange and learn about my country's health governance and epidemic prevention effectiveness. The school (School of Public Health) subsequently strives for and implements the Disease Control Agency, leading to other government agencies' Painting will be quite helpful.

postscript: UAA Principal Yu 12 month 4 The day is expressed by e-mail that the island of Java Central Jakarta Director of the Provincial Department of Health and Diseases A group of four officials including disease control officials plan to visit Taiwan in December to examine my country's tuberculosis and dengue fever prevention policies Measures, I hope we can help arrange the itinerary, and it's obvious that this visit UAA Follow-up results have been seen.



ATTENDANCES LIST OF GUEST LECTURE AND ROUND TABLE DISCUSSION

WITH PROF. TZAY-JINN CHEN, MD, MPH List of participants 與會人員名單

No	Name	Institution	Position
1	Prof. Hamam Hadi, MS.,Sc.D	University of Alma Ata	Rector of UAA
2	Siti Nurunyah, SST.,M.Kes	University of Alma Ata	Vice Rector of UAA
3	Eka Budi W.	Health office of Kulonprogo Distric	Staff
4	Agus Suharto, S.Kep.Ns	Medical Center of Dr. Soeradji T.	Staff
5	Nur Suermi	Municipal Hospital of Sleman	Team of TB control
6	Tatik Nurhayati	Health office of Central Java Province	Head of communicable diseases control division
7	S. Armando	Health office of Yogyakarta City	Head of communicable diseases control division
8	Wahyu Handoyo	Health office of Central Java Province	Staff of communicable diseases control division
9	Setyarini	Health office of Yogyakarta Province	Head of communicable diseases control division
10	Puntho Aji	Health office of Yogyakarta Province	Staff of TB Control
11	Desi Fajar Susanti	Medical Center of Dr. Soeradji T.	Pediatric specialist doctor
12	Zakiah Novianti	Medical Center of Dr. Soeradji T.	Internist Spesialist Doctor
13	Hartono, S.Psi, M.Psi.	Municipal Hospital of Soejarwadi	Head of Education division
14	Jaka M.	Respiration Center Hospital	Director of Respiration center

No	Name	Institution	Position
		Yogyakarta	Hospital Yogyakarta
15	Dwi Setyawati	Respiration Center Hospital Yogyakarta	Team of DOTS
16	Dulzaini	Health office of Sleman Distric	Head of communicable diseases control division
17	Lambang Sukarno	Respiration Center Hospital Yogyakarta	Team of DOTS

Figure 11.30



Figure, 11.30 Director Chen Zaijin's keynote speech



Figure, 11.30 Roundtable discussion meeting between Director Chen Zaijin and local health officials



Figure, 11.30 Discussion meeting between the Peking Medical team and Ama Ata University and local officials



Figure, 12.01 Dean Naiwen Guo delivered a speech at the opening ceremony of Ama Ata University



Figure, 12.01 Group photo of Dean Guo Naiwen and Indonesian distinguished guests at the school's anniversary

## 出國報告審核表 Review Form for Going Abroad Report

出國報告名稱: Go to Yogyakarta, Indonesia- University of Alma Ata (UAA) Exchange visit			
出國人姓名 ( 2 More than 1 Human representative)		職稱	服務單位
Guo Naiwen		Dean	Taipei Medical University
出國類別	• 考察 • Further study • the study • practice • 其他 visits 訪 (例如國際會議、國際比賽、業務接洽等) (Such as international conference, international competition, business contacts, etc.)		
出國期間: 106 year 11 month 29 Day to 106 year 12 month 02 day		報告繳交日期: 106 year 12 month 05 day	
出國人員 自我檢核	計畫主辦 機關審核	審 核 項 目	Item
•	•	1. Submit the report of going abroad according to the limit	
•	•	2. Complete format (this article must have "purpose" , "process", "Experiences and Suggestions")	
•	•	3. No plagiarism related information	
•	•	4. Full and complete content	
•	•	5. Suggestions have reference value	
•	•	6. Send this agency for reference or research	
•	•	7. Send it for reference	
•	•	8. Returned for correction, reason:	
•	•	( 1 ) Does not comply with the original approved plan for going abroad	
•	•	( 2 ) Written in a foreign language or only based on the collected foreign language materials	
•	•	( 3 ) The content is empty and brief or does not cover the required items	
•	•	( 4 ) Plagiarizing all or part of the relevant information	
•	•	( 5 ) Citing relevant information without indicating the source	
•	•	( 6 ) The electronic file is not processed in accordance with the format	
•	•	9. In addition to uploading this report to the Overseas Report Information Network, it will be adopted for public publication:	
•	•	( 1 ) Handling the seminar (information meeting) of the agency's report abroad and share knowledge with colleagues.	
•	•	( 2 ) Submit a report to the agency's business report	
•	•	( 3 ) other _____	
•	•	10. Other handling opinions and methods:	
出國人簽章 ( 2 More than people, Be able to 1 Human representative)	計畫主辦 機關 審核人	一級單位主管簽章 Signature of the level 1 supervisor	機關首長或其授權人員簽章 Signature of the head of the agency or authorized personnel

( 7) Invitation plan

The project team invited the United States or Southeast Asian countries to implement JEE Experts assessing actual experience Anti-epidemic talents conduct lectures and exchanges in China, formulate plans for inviting experts in related fields, implementation status and benefit evaluation as follows:

1. School of Public Health, National University of Singapore Dr. Kee Seng Chia Dean

Dean Xie Jicheng has already 5 Visits and exchanges in the month, although it is not used for the project funds, but to assist the planning and implementation team Various matters. First at 5 month 15 Day to 16 Presented a lecture at Taipei Medical University, negotiated cooperation with planners, and discussed the current situation of epidemic prevention in Singapore. 5 month 16 We will visit the Department of Disease Control on the day to share experiences and exchanges with Director Zhou Zhihao, Deputy Director Luo Jun and colleagues in the department, so that both parties can grasp real-time information

After the meeting, I was informed by my colleagues in the department that a communication channel had been established with the Singaporean health unit, but re From the perspective of benefit evaluation, Dean Xie Jicheng once assisted the head of the department in the itinerary arrangement and visits to Singapore. Will refer to the country when visiting Dr. Vernon Lee The director came to visit; 11 In the month of the month, Dean Qiu Yawen and Dean Qiu Hongyi were invited to give speeches and visits in Singapore WHO Former Assistant Director of Health and Safety Dr. Keiji Fukuda It can be seen that Dean Xie's contacts and network are one of the important channels for in-depth cooperation within the department in the future.



Picture 3: Dean Xie Jicheng's speech to the masters and students of Beijing Medical University

2. Thailand Disease Control Agency Dr. Tanarak Plipat Deputy Director and Ministry of Epidemiology of Thailand IHR Capability development team resources

Deep official Ms. Keratikarn Kladsawas

Thailand's deputy director and senior officials 6 month 11 Day to 13 Japanese visits and exchanges, preceded by 6 month 12 Against the country TB , Dengue Fever Briefings on the current status of the medical environment and the medical environment, and communicate with the planning team based on the information provided; finally 6 month 13 Visit the Department of Disease Control on the day to share experiences and exchanges with Director Zhou Zhihao, Deputy Director Luo Jun and colleagues in the department, so that both parties can grasp real-time information on

This time, Thailand's foreign guests have been excellent in the evaluation of the effectiveness of international cooperation. Thailand is the base of many international



And part of GHSA The leading country of the project Dr. Tanarak Assistance during the visit is not only through

Pass TEPHINET Preconference Workshop Application, also in 8 When holding an event in Chiang Mai in

Make efforts to promote, so that Taiwan can show its ability to handle activities in the pre-conference meeting, and then win 2020 Year from Taiwan

Sponsored by the CDC TEPHINET Regional annual meeting; finally agreed 11 He came to Taiwan again as the speaker of the

international forum in May, showing a high degree of cooperation and tacit understanding between the two sides, and it will be a great help for the deepening of Thailand in



Figure 4. Dr. Tanarak Plipat and Ms. Keratikarn Klagsawas Group photo with the BeiYi team



Figure 5. Dr. Tanarak Plipat and Ms. Keratikarn Klagsawas Group photo with the Director of Disease Control

### 3. Singapore Department of Disease Control Dr. Vernon JM Lee Director

Dr. Vernon Already at 7 month 25 Day to 28 Japanese visits and exchanges, preceded by 7 month 26 Against the country TB ,

Dengue Fever Briefing on the status of Roadmap The writing method provides the professional advice of the project team and the sharing of appraisal experience. 7 month 27 Visited the National Health Department on Japan, and exchanged information with Chief Secretary Wang Yiren and colleagues in the Department; finally 7 month 28 Visit the Department of Disease Control on the day to share experiences and exchanges with Director Zhou Zhihao, Deputy Director Zhuang Renxiang and colleagues in the department, so that both parties can grasp real-time information on epi

The benefit assessment of the visit of the Director General in Singapore includes the following points. This time it was referred by Dean Xie Jicheng, and Dr. Vernon Served as JEE The assessment committee is also continuing to assist the country and neighboring areas JEE The assessment is an important ally for my country's health, safety and epidemic prevention, and it may become an international cooperation in the strategic roadmap in the future. As a unit.



Figure 6. Dr. Vernon Group photo with the Beiyi team



Figure 7. Dr. Vernon Group photo with the director of the National Health Administration and colleagues



Figure 8. Dr. Vernon Group photo with the Director of Disease Control

#### 4. University of Malaya, Malaysia Dr. Wah-Yun Low professor

Dr. Wah-Yun Low Already at 9 month 1 From the day to the school of public health 4 A short-term visiting professor for a month, although he did not use the funds of this project, the effectiveness of this international cooperation is evaluated as follows: Dr. Wah-Yun Low Multiple Identity (Professor, University of Malaya, APACPH The next chairman of the board and chief editor of the Asia-Pacific Public Health Journal), for Malaysia's contacts are of great help, such as assisting the planning team in inviting Malaysian experts Dr. TJZ and many more, Also assisted in planning the itinerary for members of the planning team to visit Malaysia. 12 month 15 , twenty one The Ministry of Health and Welfare will guide and organize medical and health professionals' essay writing courses every day to promote the internationalization of my country's research results Visibility of the healthcare industry.



Figure 9. Dr. Wah-Yun Low Photo of the professor giving a lecture



5. Department of Health of Quang Ninh Province, Vietnam Dr. Vu Xuan Dien Minister, Quang Ninh Province CDC Dr. Ninh Van Chu Director and Quang Ninh Province Tuberculosis and Thoracic Hospital Dr. Phan Vu Duc Dean

Vietnam Dr. Vu Xuan Dien Director, Dr. Ninh Van Chu Director and Dr. Phan Vu Duc Dean are

It was through Dean Guo Naiwen 8 Invited during a visit in the month of 10 month 4 Day to 7 Japanese visits and exchanges, preceded by 10 month 5 Japan has a preliminary understanding with the project team, and once again targeted the country TB , Dengue Fever Communicate with the current situation; also in 10 month 6 Visited the Department of Disease Control on the same day, with Director Zhou Zhihao, Deputy Director Luo Jun and colleagues in the department, targeting the country TB , Dengue Fever Conduct a briefing, analyze the current situation of the country, and discuss with the head of the department in the future cross-border cooperation and exchanges.

The evaluation of the effectiveness of international cooperation for the visit of foreign guests in Vietnam can be described as a major step forward in the department Inspection, the head of the department also 12 Go to Vietnam on site visit every month, aiming at future cooperation TB , Dengue Fever Go deep into the field to understand how various resources are allocated and brought in. The experience after the comprehensive exchange is that although the local area However, the training of epidemic prevention personnel is also an urgent need. After the integration of resources is brought in, it is expected to further promote the epidemic Drive my country's economic growth.



Picture 10: Group photo of Vietnamese foreign guests and the Director of the CDC

#### 6. "Practicing Global Health Security and International Health Regulations: Strengthening Cooperation" International Forum

Foreign guests are invited to the international forum on "Practicing Global Health Security and International Health Regulations: Strengthening Cooperation"

A total of eight officials and experts from six countries are listed below:

- (1) Thailand-Department of Disease Control Dr. Tanarak Plipat Deputy Director,
- (2) Thailand-Disease Control Department Prevention and Control Group VI Dr. Hansa Ruksakom Team leader,
- (3) Belize-Ministry of Health Medical Services Dr. Marvin Manzanero Director (equivalent to the Deputy Director of the Ministry of Health of the country),
- (4) Malaysia – GHSA expert Dr. Tam Jenn Zhueng ,

(5) United States - Next Gen principal Dr. Jamechia Hoyle ,

(6) United States - Next Gen Vice Chairman Dr. Taylor Winkiemba ,

(7) South Korea-Yonsei University Dr. Joshua Sir professor,

(8) Singapore-National University of Singapore School of Public Health Dr. Clarence Tam professor,

Foreign guests 11 month 6 Day to 11 Visits and exchanges in Japan; 8 Japan participated in the "Practice of Global Health Security and

International Health Regulations: Strengthening Cooperation" international forum, Action Packages Implementation status,

Countries GHSA Experience, and NGO The organization's role in health and safety and other topics; 9 Day disease

The Control Department launched a continuous 3 Round table discussion meeting for my country JEE In the assessment, the themes of common

human and animal diseases, antibiotics and drug resistance, biological preservation and biological safety, and my country's health and epidemic prevention units, experts and sch

Exchanges, provide valuable experience in the country, and allow planning units to integrate domestic and foreign experience and current conditions to develop my country's

The strategic roadmap for infectious diseases, antibiotics and drug resistance, biological preservation and biological safety, to facilitate future health and safety prevention

The development of the epidemic; another scheduled visit to Wanfang Hospital that afternoon TB The visit of the Prevention and Control Center shows the medical system of Beijin

For the anti-epidemic technology and energy to be exported in the future.

The evaluation of the benefits of international cooperation in this international forum is described as follows for each country:

(1) Thailand Dr. Tanarak Plipat The Deputy Administrator came to Taiwan as the speaker in the previous exchange, and this time he took the country as the speaker. AMR

Under the theme of leading the country, share the country's experience so that the participants can receive the most real-time information for the benefit of our country AMR

Planning of strategic roadmap.

(2) Thailand Dr. Hansa Ruksakom He is currently the leader of the sixth group of the prevention and control group of the country's disease control agency.

National health-related units and hospitals, especially in epidemiology, have a certain professional ability, which can be used in the future

Practical experience has driven epidemic prevention resources into the local area.

(3) Belis Dr. Marvin Manzanero Ministry of Health GHSA The person in charge, that is, the director of medical services (Berry

The head of the country's medical system ( CEO ) , Next), this time I was invited to serve as a speaker, providing

Relevant assessment experience in China and the United States will be used to consolidate friendly relations and enhance the exchange of knowledge and capabilities between

(4) Malaysia Dr. Tam Jenn Zhueng For the country GHSA Experts whose specialty lies in emergency response ( EOC) Department of

Copies and Malaysia is EOC Leading country, take this opportunity to 11 month 9 Japan will communicate with my country's National Security

Command Center to provide future integration strategies to enhance my country's emergency response capabilities.

(5) United States Dr. Jamechia Hoyle for Next Gen Person in charge, previously GHSA in 10 Held in Uganda

The 4th High-level Ministerial Conference Dr. Hoyle With the help of the recommendation and assistance from the Taipei Medical University

School of Public Health, Dean Guo Naiwen and the Department of Disease Control, Mr. Wang Baiwen, NextGen Participation as a member, through this important

The meeting immediately updated our national defense epidemic funds, so the future will be influential NGO In terms of organizational cooperation, Next Gen meeting

Is a key role.

(6) United States Dr. Taylor Winkiemba for Next Gen The vice chairman is a veterinarian who has worked in many international organizations,

In addition, he has been involved in many professional fields, such as policy, human rights, and zoonotic diseases. With this experience, not only

Link only NGO The organization, through its professional advice in the field of human and animal

Provide suggestions and incorporate them into the strategic roadmap.

(7) Yonsei University Dr. Joshua Sir Professor, the current position is the world's first global health and safety regulations degree program leader

Ren, through his professional exchanges, combined with the school's first doctoral degree program in global health and health safety in Taiwan,

Contribute to the design and teaching of relevant courses for talent training in the country, and achieve a multinational cooperation team.

(8) Infectious Disease Specialist, School of Public Health, National University of Singapore, Singapore Dr. Clarence Tam Assistant Professor for this

Speakers, through Dean Xie Jicheng, Dr. Vernon Invited to Taiwan under the recommendation of others, his professional field lies in AMR ,

By discovering more Singaporean experts, the feasibility of bilateral exchanges can be consolidated and real-time exchange of epidemic prevention information can be achieved.



Figure 11. Group photo of the head of the International Forum and foreign guests

7. Department of Disease Control, Department of Health, Central Java Province, Indonesia Mr. Sigit Armunant Director and Community Health Center Mrs.

Suharsi director

Disease Control Agency Mr. Sigit Armunant Director and Community Health Center Mrs. Suharsi Directors are from Guo Naiwen Academy

Director, Director Chen Zaijin and Assistant Chen Guanwen 11 month 28 Invited after the exchange in Japan, 12 month 19 Day to twenty three

Japanese visits and exchanges, preceded by 12 month 20 Japan has a preliminary understanding with the project team, and once again targeted the country TB ,

Dengue Fever To communicate with 12 month twenty one Visited the Department of Disease Control on the same day, and met with

Deputy Director Luo Jun and colleagues in the department to target the country TB , Dengue Fever Conduct a briefing, analyze the current

situation of the country, and discuss with the head of the department in the future cross-border cooperation and exchanges.

The evaluation of the international cooperation benefits of the Indonesian foreign guests' visit is as follows: Through the experience of bilateral exchanges, Central Java

Looking forward to further cooperation opportunities with Taiwanese government agencies in the future, signing a cooperation agreement, and integrating Taiwan's defense techn

Resources are brought into the country, so future opportunities for cooperation will be assessed within the department. The Beijing Medical Team will assist the two parties to cont

Taiwan's influence in global epidemic prevention.



Picture 12: A group photo of Indonesian foreign guests with the director of the CDC, colleagues and the Beijing Medical team

Table 6. Results and benefits of the invitation

日期	外賓 foreign guests	預期效益 expected benefit	實際成果效益評估 actual results and benefit evaluation
2017.05.14~18 School of Public Health	National University of Singapore Dr. Kee Seng Chia Dean	<p>Invite officials, experts and scholars from the new southward</p> <p>The expected benefits are as follows:</p> <p>1. Share the country's medical environment and public health situation.</p> <p>Health policy, TB , Dengue Fever Wait</p> <p>2. Share the country in GHSA versus JEE Of</p> <p>Strengths to our country's speech or short-term lecture</p> <p>Lessons, and to establish a joint</p> <p>Department of pipeline or platform.</p> <p>3. Deep cultivation and cooperation for the transfer of future</p> <p>Target country for the project to establish</p> <p>The channels or platforms for the epidemic prevention and control</p>	<p>This time, Dean Xie Jicheng was invited to participate in the public health summit held by the hospital</p> <p>Forum (including Taipei Medical University, University of Tokyo, Japan and Singapore National Singapore University), the next day, we will meet with Director Zhou Zhihao, Deputy Director Luo Jun and the Department of Disease Control</p> <p>Colleagues inside, shared the current situation of the national defense epidemic, and planned to sign a contract between</p> <p>Research project; finally recommended by the Singapore Department of Disease Control Dr. Vernon Director</p> <p>Yu 7 Visit and exchange in Taiwan in January.</p> <p>From the perspective of evaluation of the effectiveness of international cooperation, Dean Xie Jicheng once assisted the</p> <p>The itinerary and visitor during the inspection in Singapore will also be referred to the</p> <p>country Dr. Vernon The director came to visit; 11 In the month of the month, Dean Qiu Yawen and</p> <p>Dean Qiu Jicheng gave speeches and visits in Singapore WHO Former Assistant Health and Safety Officer</p> <p>long Dr. Keiji Fukuda It can be seen that Dean Xie's contacts and network are one of the important</p> <p>channels for in-depth cooperation within the department in the future.</p>

日期	外賓 guests	預期效益	實際成果效益評估
2017.06.11~13	Thailand Disease Control Agency Dr. Tanarak Plipat Deputy Director, Thai Epidemiology Bureau, IHR Capacity development group Senior officials Ms. Keratikarn Kladsawas		Thailand's Disease Control Agency Dr. Tanarak Plipat Deputy Director, Thailand Epidemic Game of IHR Senior Officer of Capacity Development Team Ms. Keratikarn Kladsawas Come Taiwan, first go to the Disease Control Department to meet Director Zhou Zhihao, Deputy Director Luo Jun and Colleagues, share the country's medical environment, TB , Dengue Fever Wait for the current situation and borrow This will establish a communication channel between the two sides for epidemic prevention; secondly, assist the project Application for the pre-conference workshop of the International Forum held in Chiang Mai; finally GHSA and JEE To provide some guidance and suggestions for the planning team; finally, we will invite Dr. Tanarak Plipat The deputy director once again 11 Come to Taiwan this month to participate in international forums and share Thailand GHSA and JEE The evaluation experience. This time, Thailand's foreign guests have been outstanding in the evaluation of the benefits of international cooperation Of the International Health Organization and part of GHSA The leading country of the project by Dr. Tanarak Assistance during the visit, not only through TEPHINET Preconference Workshop Application, also in 8 Events in Chiang Mai in January At the time, vigorously promote, so that Taiwan can show its ability to handle activities in the pre-conference meeting. And then get 2020 Hosted by the Taiwan Disease Control Agency TEPHINET Regional annual meeting; finally agreed 11 Came to Taiwan again as the speaker of the international forum in October, showing The high degree of cooperation and tacit understanding will be a great help for the deepening of Thailand in the future.

日期	外賓 guests	預期效益	實際成果效益評估
2017.07.25~30	Singapore Department of Disease Control Dr. Vernon JM Lee Director		<p>Singapore's Department of Disease Control Dr. Vernon JM Lee The director came to Taiwan and first visited the National Health Department, sharing the country's health with the chief secretary Wang Yiren and colleagues. Promotion and other issues and development status; secondly, visit the Department of Disease Control to visit Zhou Zhong Director, Deputy Director Zhuang Renxiang and colleagues in the department shared the country TB , Dengue Fever Wait for the current situation, and use this to establish a communication channel between the two sides; finally, the plan Sharing from Beiyi JEE Evaluation experience to benefit the project team in Roadmap The output of writing.</p> <p>The benefit assessment of the visit of the Director of Singapore has the following points.</p> <p>Referred by the dean, and Dr. Vernon Served as JEE The assessment committee is also continuing to assist the country and neighboring areas JEE Evaluation, for my country's health and safety</p> <p>An important ally in the epidemic, it may become an international Co.</p>
2017.09.01~12 . 31	University of Malaya, Malaysia Dr. Wah-Yun Low professor		<p>Invited to be a short-term visiting professor at the School of Public Health, Taipei Medical University, although not Use the project funds, but through Dr. Wah-Yun Low Multiple identities (Malayan University professor, APACPH The next chairman and chief editor of the Asia-Pacific Public Health Journal), It is of great help to the connection with Malaysia.</p> <p>The evaluation of the benefits of this international cooperation is as follows: Dr. Wah-Yun Low Assist in planning The team is inviting experts from Malaysia Dr. TJZ Wait, and also help the project team Itinerary planning for the staff to visit Malaysia, also in 12 month 15 , twenty one Daily to the Ministry of Health and Welfare to guide and organize medical and health personnel essay writing courses to promote research in The results jumped internationally, increasing the visibility of my country's medical industry.</p>

日期	外賓 guests	預期效益	實際成果效益評估
2017.10.04~07	<p>Department of Health of Quang Ninh Province, Vietnam</p> <p>Dr. Vu Xuan Dien Director</p> <p>Quang Ninh Province CDC</p> <p>Dr. Ninh Van Chu director</p> <p>Tuberculosis and Thoracic Hospital of Quang Ninh Province</p> <p>Dr. Phan Vu Duc Dean</p>		<p>This invitation Dr. Vu Xuan Dien Director, Dr. NinhVan Chu director, Dr. PhanVu Duc The dean came to Taiwan and went to the Disease Control Department to meet with Director Zhou Zhihao</p> <p>Yijun's deputy director and colleagues in the department shared the country's medical environment, TB , Dengue Fever</p> <p>Wait for the current situation, and establish a communication channel or platform for epidemic prevention between the t</p> <p>The target country of the cooperation plan for the transfer of epidemic prevention technology to colonization, with Beiyl</p> <p>After many exchanges, and through the promotion of this epidemic prevention transfer, on future cooperation,</p> <p>There should be a solid partnership.</p> <p>The evaluation of the effectiveness of international cooperation in the visit of foreign guests from Vietnam can be descr</p> <p>Through the experience of bilateral round-trips, the head of the department also 12 Field study in Vietnam</p> <p>For future cooperation TB , Dengue Fever Go deep into the field to understand how various resources</p> <p>are allocated and brought in. The experience after the comprehensive exchange provides</p> <p>However, the training of epidemic prevention personnel is also an urgent need. After the integration of resources is bro</p> <p>It is hoped that the epidemic prevention industry will be further promoted to drive my country's economic growth.</p>
2017.11.06~11	<p>Official of Ministry of Health of Malaysia</p> <p>Dr. Tam Jenn Zhueng</p>		<p>This time, foreign guests from various countries are invited to participate in the "Practice of Global Health Security and</p> <p>"Strengthening Cooperation" International Forum, foreign guests come from six countries, a total of eight</p>
2017.11.07~10 Thailand's	<p>Department of Disease Control, Ministry of Health, Thailand</p> <p>Dr. Tanarak Plipat Deputy Director</p> <p>Disease Control and Prevention Group</p> <p>The sixth group</p> <p>Dr. Hansa Ruksakom Group leader</p>		<p>Officials and experts, invited them to share in the meeting Action Packages Implementation status,</p> <p>countries GHSA Experience, and NGO Organization's role in health and safety</p> <p>Themes such as color, etc; 3 Round table discussion</p> <p>Meeting for our country JEE Assessment of common infectious diseases, antibiotics and drug resistance</p> <p>The themes of sex, biological preservation and biological safety and my country's health and epidemic prevention units</p>



日期	外賓 foreign guests	預期效益 Expected benefit	實際成果效益評估 Actual results benefit evaluation
2017.11.07~10	Belize Department of Health Medical Services Dr. Marvin Manzanero Director		Exchanges across countries, providing valuable experience in the country,  Based on the domestic and foreign experience and current situation, the development of common infectious diseases a  And a strategic roadmap for drug resistance, bio-preservation and bio-safety for future health  The development of safety and epidemic prevention.  The evaluation of the benefits of international cooperation in this international forum is described as follows:
2017.11.07~11	United States Next Gen NGO principal Dr. Jamechia Hoyle , Vice Chairman Dr. Taylor Winklema		(1) Thailand Dr. Tanarak Plipat The deputy director continued the previous exchange and came to Taiwan as a speaker  This time, the country is AMR Under the theme of leading the country, share the country  Experience, so that participants receive the most real-time information for the benefit of our country AMR Policy  Sketch the planning of the road map.
2017.11.07~11	Yonsei University Dr. Joshua Sir professor		(2) Thailand Dr. Hansa Ruksakom The current position is the prevention and control of the country's disease control ag  The sixth group leader of the group, once worked in the country's health-related units and hospitals  Services, especially for epidemiology with a certain degree of professional ability, in the future, you can use  Practical experience has driven epidemic prevention resources into the local area.
2017.11.07~10	School of Public Health National University of Singapore Dr. Clarence Tam professor		(3) Belis Dr. MarvinManzanero Ministry of Health GHSA principal,  That is, the director of the medical service department. This time he was invited to serve as the speaker  Related assessment experience in the district, and use this to consolidate friendship  Can communicate.  (4) Malaysia Dr. Tam Jenn Zhueng For the country GHSA Expert  In emergency response ( EOC) Part of and Malaysia is EOC Leading country  Home, take this opportunity to 11 month 9 Japan communicated with my country's National  Security Command Center to provide future integration strategies to enhance my country's emergency  Ability to respond.

日期	外賓 guests	預期效益	實際成果效益評估
			<p>(5) United States Dr. Jamechia Hoyle for Next Gen The person in charge, previously 10 month</p> <p>The ministerial meeting held in Uganda, thanks to Dr. Hoyle With the assistance of</p> <p>Only Taiwan has the opportunity to participate and update our national defense epidemic in real time through imp</p> <p>Capital, so the future is influential NGO In terms of organizational cooperation, Next Gen</p> <p>Will be a key role.</p> <p>(6) United States Dr. Taylor Winkiem for Next Gen The vice chairman is a physician,</p> <p>Worked in many international organizations, and involved in many professional fields, such as policy,</p> <p>Human rights, zoonotic diseases, etc., through this experience, not only connect</p> <p>NGO The organization, through its professional advice in the field of human and animal</p> <p>The team can incorporate the suggestions it provides into the strategic roadmap.</p> <p>(7) Yonsei University Dr. Joshua Sir Professor, the current position is the world's first global</p> <p>The director of the degree program of the Health and Safety Regulations, through his professional exchanges, co</p> <p>This school's first doctoral degree program in global health and health safety in Taiwan is helpful</p> <p>Design and teach courses related to talent training in the country to achieve cross-border cooperation</p> <p>team.</p> <p>(8) Infectious Disease Specialist, School of Public Health, National University of Singapore, Singapore Dr.</p> <p>Clarence Tam Assistant professor is the guest speaker, through Xie Jicheng Academy</p> <p>long, Dr. Vernon Invited to Taiwan under the recommendation of others, his professional field lies in</p> <p>AMR , By discovering more Singaporean experts, the bilateral exchanges</p> <p>Feasibility, to achieve real-time exchange of epidemic prevention information.</p>
2017.12.19~23	Department of Health, Central Java Province, Indonesia Disease Control Office		<p>This invitation to the Central Java Department of Health Mr. Sigit Armunant Director and Mrs.</p> <p>Suharsi The director came to Taiwan and went to the Department of Disease Control to meet with Deputy Director Luo</p>

日期	外賓		預期效益		實際成果效益評估		
	Mr. Sigit Armunant director  Community Health Center  Mrs. Suharsi director				Colleagues, share the country's medical environment, TB , Dengue Fever Wait for the current situation and establish  The two parties' epidemic prevention communication channels or platforms; finally, Indonesia also transferred the epid  The target country of the deep cultivation cooperation project, through the Beijing Medical team and Central Java  Under the exchange, and through the promotion of this epidemic prevention and colonization, there should be  Have a solid cooperative relationship.  The evaluation of the international cooperation benefits of the Indonesian foreign guests' visit is as follows:  The experience of exchange, Central Java Province looks forward to further cooperation with Taiwanese government a  Cooperation opportunities, sign a cooperation agreement, and bring Taiwan's defense technology and resources into t  Therefore, the future opportunity for cooperation will be assessed by the department, and the Beijing Medical team will  Contact to enhance Taiwan's influence in global epidemic prevention.		
Expected performance of the invitation program: total 17 Number of people, South Korea is not listed in the project to be achieved in the plan							
Singapore	Thailand	Malaysia	United States	Indonesia	Vietnam	Belis	Korea
2	2	2	2	4	4	1	0
Invitation to visit progress: total reached 18 Person times							
3	4	2	2	2	3	1	1

( 8) Summary of this section

Since the implementation of this project, the information collection of key Southeast Asian countries has been completed (including: Vietnam, Indonesia, Myanmar, Laos) And the Philippines, etc.), in response to its epidemic prevention system and local infectious disease prevention and control needs or the dengue fever and tuberculosis that we can tra The topics were discussed in depth, and the following information was summarized: Although Myanmar, Laos, and the Philippines have academic exchanges, such as Forum activities, enrollment activities and mutual visits between units, but under the influence of political and economic factors, it is difficult for the central or local officials to have a dire The country's comprehensive epidemic prevention technologies and mechanisms are brought into it, so it is not a priority country for cooperation in the future; After evaluating and collecting the sentiments of Vietnam, Indonesia and other countries through the academic network of the Beijing Medical team, the following key projects were fou

1. Both countries are key countries in their own new southward policy, and deepening the cooperative relationship will certainly help in future epidemic prevention.
2. How many sister schools there are between the two countries and our school, such as signing multiple cooperation agreements, short-term exchanges of teachers and students

It has a certain influence on the cultivation of talents.

3. The two countries TB and Dengue Fever In terms of health and epidemic prevention, there are deficiencies, not only resources, but also for people

The technical level of talents still needs to be refined.

Therefore, based on the aforementioned cooperation assessment, a strategy for cooperation with the two countries can be developed.

In addition, it is part of the plan to go abroad, to collect the epidemic prevention strategies of the United States, Southeast Asian countries or countries with diplomatic relations. Seeking opportunities for international cooperation, the executive team has completed twenty two The exchange of people went to the United States, Indonesia, Thailand, Vietnam and In Malaysia, the benefits after the visit are as follows:

1. Continue to deepen discussions and exchange opinions with experts on global health and safety.
2. Grasp more key contents of global health and safety activities and information about future global development plans.
3. Visit schools, research units and government agencies related to global health and safety, plan future epidemic prevention talent training projects, Research, communication, etc.
4. Organize international forums to promote my country's defense epidemic technology and energy, and promote the exchange of information between countries.
5. Expand the international visibility of our country's health and safety, and connect more opportunities for cooperation.

Finally, in the part of the invitation plan, through inviting the United States or Southeast Asian countries to implement JEE Experts who assess actual experience and Relevant anti-epidemic talents in China gave speeches and exchanges in China, and the executive team invited them 18 Foreign guests were from Singapore, Thailand, Malaysia, the United States, Indonesia, Vietnam, Belize and South Korea evaluate the benefits of inviting foreign guests as follows:

1. Provide relevant speech courses for domestic health units, such as the improvement of infectious diseases, chronic diseases and thesis writing ability, To facilitate the cultivation and development of my country's medical talents, and to establish communication channels between the two sides for epidemic prevention.
2. Integrate domestic and foreign experience and current situation, and GHSA , JEE Of the evaluation experience, the development of my country's common infectious diseases, A strategic roadmap for antibiotics and drug resistance, biological preservation and biological safety.
3. The target countries of the deep cultivation cooperation plan for the transfer of future anti-epidemic technologies: Vietnam and Indonesia, establish a pipeline of communication Or platform.

## 2. 持續蒐集 GHSA 和 JEE 評估發展動向，以及國家公衛整備和防疫能力的情資

Since the implementation of this plan, monthly work reports will be submitted every month, and the content will be collected and summarized for the implementation of the plan.

Description of the progress of handling international forums, foreign invitations/visits, handling of expert consultation meetings, and other special proposals related to the plan.

Gathered into a booklet for the contents of the matters discussed in the month, GHSA The dynamic contents of the website are event information and JEE Information.

compilation and update of the assessment report.

(One) JEE Evaluation report

JEE The information source of the assessment report except GHSA Website, also synchronized with the World Health Organization Strategic.

Partnership website JEE Review the information of the country.

The information is updated as of the date of submission of the report, only GHSA The website will update the report classification from time to time. GHSA Already.

Announced on the World Health Organization website JEE The report is the updated baseline, the original GHSA The website is sorted in alphabetical order.

of each country, and the World Health Organization website is classified into six major regions. To facilitate information comparison, the World Health Organization website classification.

式presentation.

1. Countries complete JEE The situation

Statistics from the following six districts, 2016 Year to 2017 Total year 43 Country complete JEE report, 2017 Expected to have twenty four Country in.

succession JEE Evaluation, if the above-mentioned countries have completed the evaluation as scheduled and the country's report is posted on the World Health Organization website.

2017 The World Health Organization website will be available at the end of the year 67 Country complete JEE Query and collect report data.

(1) Africa

- 2016 Year to 2017 Total year 18 Country complete JEE report
- 2017 Annual forecast 13 Country will proceed JEE Evaluation

Table 7. Africa 2016~2017 year JEE Review progress

編號 Numbering	國家 Country	評估期間 Evaluation period	預定評估期間 Predetermined evaluation period	備註 Remarks
1	Algeria			
2	Angola			
3	Benin	2017.05.21~05.26		French
4	Botswana		2017.12.03~12.08	
5	Burkina Faso		2017.12.03~12.08	
6	Burundi			
7	Cameroon		2017.09.24~09.29	
8	Cabo Verde			
9	Central African Republic			
10	Chad		2017.08.07~08.11	

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Pre-evaluation period	備註 Remarks
11	Comoros		2017.08.21~08.25	
12	Congo			
13	Côte d'Ivoire	2016.12.05~12.09		
14	Democratic Republic of the Congo			
15	Equatorial Guinea			
16	Eritrea	2016.10		
17	Ethiopia	2016.03		
18	Gabon			
19	Gambia		2017.09.24~09.29	
20	Ghana	2017.02.06~02.10		
twenty one	Guinea	2017.04.23~04.28		French
twenty two	Guinea-Bissau			
twenty three	Kenya	2017.02.27~03.03		
twenty four	Lesotho	2017.07.10~07.14		
25	Liberia	2016.09		
26	Madagascar		2017.07.10~10.14	
27	Malawi			
28	Mali		2017.06.26~06.30	
29	Mauritania	2017.03.27~03.31		
30	Mauritius			
31	Mozambique	2016.04.18~04.22		
32	Namibia	2016.11.28~12.22		
33	Niger			
34	Nigeria	2017.06.11~06.20		
35	Rwanda			
36	Sao Tome and Principe			
37	Senegal	2016.11.28~12.02		French
38	Seychelles			
39	Sierra Leone	2016.10.31~11.04		
40	South Africa		2017.11.26~12.01	

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Pre-estimated evaluation period	備註 Remarks
41	South Sudan		2017.10.15~10.20	
42	Swaziland			
43	Togo		2017.10.08~10.13	
44	Uganda	2017.06.26~06.30		
45	United Republic of Tanzania Republic of	2016.02		
46	Tanzania-Zanzibar Zambia	2017.04.22~04.28		
47			2017.08.07~08.11	
48	Zimbabwe		2017.11.19~11.24	

(2) Americas

- 2016 Year to 2017 Total year 1 Country complete JEE report
- 2017 Annual forecast 0 Country JEE Evaluation

Table 8. Americas 2016~2017 year JEE Review progress

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Pre-estimated evaluation period	備註 Remarks
1	Antigua and Barbuda			
2	Argentina			
3	Bahamas			
4	Barbados			
5	Belize			
6	Bolivia (Plurinational State of) Brazil			
7				
8	Canada			
9	Chile			
10	Colombia			
11	Costa Rica			
12	Cuba			
13	Dominica			
14	Dominican Republic			
15	Ecuador			
16	El Salvador			

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Scheduled evaluation period	備註 Remarks
17	Grenada			
18	Guatemala			
19	Guyana			
20	Haiti			
twenty one	Honduras			
twenty two	Jamaica			
twenty three	Mexico			
twenty four	Nicaragua			
25	Panama			
26	Paraguay			
27	Peru			
28	Saint Kitts and Nevis Saint			
29	Lucia			
30	Saint Vincent and the Grenadines			
31	Suriname			
32	Trinidad and Tobago			
33	United States of America	2016.06		
34	Uruguay			
35	Venezuela (Bolivarian Republic of)			

(3) Southeast Asia

- 2016 Year to 2017 Total year 3 Country complete JEE report
- 2017 Annual forecast 5 Country JEE Evaluation

Table 9. Southeast Asia 2016~2017 year JEE Review progress

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Scheduled evaluation period	備註 Remarks
1	Bangladesh	2016.05		
2	Bhutan		2017.12.11~12.15	
3	Democratic People's Republic of Korea		2017.08.28~09.02	



編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Scheduled evaluation period	備註 Remarks
4	India			
5	Indonesia		2017.11.19~11.24	
6	Maldives		2017.05.06~05.10	
7	Myanmar		2017.05.03~05.09	
8	Nepal			
9	Sri Lanka	2017.06.19~06.23		
10	Thailand	2017.06.26~06.30		
11	Timor-Leste			

(4) European area

- 2016 Year to 2017 Total year 6 Country complete JEE report
- 2017 Annual forecast 2 Country JEE Evaluation

Table 10. European area 2016~2017 year JEE Review progress

編號 Numbering	國家 Country	評核期間 Evaluation period	預定評核期間 Scheduled evaluation period	備註 Remarks
1	Albania	2016.09		
2	Andorra			
3	Armenia	2016.08.15~08.19		
4	Austria			
5	Azerbaijan			
6	Belarus			
7	Belgium		2017.06.19~06.23	
8	Bosnia and Herzegovina			
9	Bulgaria			
10	Croatia			
11	Cyprus			
12	Czech Republic			
13	Denmark			
14	Estonia			
15	Finland	2017.03		
16	France			

編號 Numbering	國家 Country	評估期間 Evaluation period	預定評估期間 Pre-evaluation period	備註 Remarks
17	Georgia			
18	Germany			
19	Greece			
20	Hungary			
twenty one	Iceland			
twenty two	Ireland			
twenty three	Israel			
twenty four	Italy			
25	Kazakhstan			
26	Kyrgyzstan	2016.11.28~12.02		
27	Latvia	2017.05.08~05.12		
28	Lithuania			
29	Luxembourg			
30	Malta			
31	Monaco			
32	Montenegro			
33	Netherland			
34	Norway			
35	Poland			
36	Portugal			
37	Republic of Moldova			
38	Spain			
39	Sweden			
40	Switzerland		2017.10.30~11.03	
41	Tajikistan			
42	The former Yugoslav Republic of Macedonia			
43	Turkey			
44	Turkmenistan	2016.06		
45	Ukraine			

編號 number	國家 country	評核期間 evaluation period	預定評核期間 scheduled evaluation period	備註 remarks
46	United Kingdom			
47	Uzbekistan			

(5) Eastern Mediterranean

- 2016 Year to 2017 Total year 11 Country complete JEE report
- 2017 Annual forecast 2 Country JEE Evaluation

Table 11. Eastern Mediterranean Region 2016~2017 year JEE Assessment

編號 number	國家 country	評核期間 evaluation period	預定評核期間 scheduled evaluation period	備註 remarks
1	Afghanistan	2016.12.04~12.07		
2	Bahrain	2016.09.04~09.08		
3	Djibouti			
4	Egypt			
5	Iran (Islamic Republic of Iran) Iraq			
6				
7	Jordan	2016.08.28~09.01		
8	Kuwait			
9	Lebanon	2016.07.25~07.29		
10	Libya			
11	Morocco	2016.06.20~06.24		
12	Oman		2017.04.02~04.06	
13	Pakistan	2016.04.27~05.06		
14	Qatar	2016.05.29~06.02		
15	Saudi Arabia	2017.03.12~03.16		
16	Somalia	2016.12.17~12.21		
17	Sudan	2016.10.09~10.13		
18	Syrian Arab Republic			
19	Tunisia	2016.11.28~12.02		
20	United Arab Emirates		2017.03.19~03.23	
twenty one	Yemen			

(6) Western Pacific

- 2016 Year to 2017 Total year 4 Country complete JEE report
- 2017 Annual forecast 2 Country JEE Evaluation

Table 12. Western Pacific Region 2016~2017 year JEE Assessment progress

編號	國家	評估期間	預定評估期間	備註
1	Australia		2017.11.24~12.01	
2	Brunei Darussalam			
3	Cambodia	2016.08.26~09.02		
4	China			
5	Cook Islands			
6	Fiji			
7	Japan			
8	Kiribati			
9	Lao People's Democratic Republic	2017.02.17~02.24		
10	Malaysia			
11	Marshall Islands			
12	Micronesia (Federated States of Micronesia)			
13	Mongolia	2017.05.12~05.19		
14	Nauru			
15	New Zealand			
16	Niue			
17	Palau			
18	Papua New Guinea		2017.04.24~04.29	
19	Philippines			
20	Republic of Korea			
twenty one	Samoa			
twenty two	Singapore			
twenty three	Solomon Islands			
twenty four	Tonga			

編號 Numbering	國家 Country	評估期間 Evaluation period	預定評估期間 Scheduled evaluation period	備註 Remarks
25	Tuvalu			
26	Vanuatu			
27	Viet Nam	2016.10.28~11.04		

## 2. JEE Policy recommendations for epidemic prevention cooperation in the literature analysis of the evaluation report

Completed in the six regions from the above table JEE The list of countries in the assessment report is available worldwide 189 Of countries, 2016 Since the year 43 Country complete JEE Evaluation report, twenty four Country is about to 2017 Year completed JEE Evaluation, it is expected that there will be 67 Countries in 2018 Completed years ago JEE Evaluation report, so global 189 Out of 2017 At the end of the year JEE The assessment completion rate will be 35% .

Collecting JEE During the evaluation report, the research team analyzed the collected information and obtained the following 3 The results of the project and policy recommendations related to my country's future cooperation in epidemic prevention.

(1) The plan was originally GHSA Announced on the website JEE The assessment report is the source of information, collect, analyze and count JEE Appraisal and development, and when the team is writing the final report, GHSA The website has been changed to World Health Organization ( WHO ) Website announcement JEE The published report is the updated benchmark. by WHO Website and GHSA The links and development of the website show that the global health and safety The importance of this issue in global health WHO The determination and effort to invest in this issue force. And from this topic trend, we can see that the original US GHSA Experts in the Global Health University Alliance ( CUGH ) seminar And several subsequent discussions with members of the research team, regarding the US President Trump's 2017 year 1 month 20 After taking office in Japan, taking a wait-and-see attitude towards the World Health Organization and international health affairs may cause global participation GHSA Concerns about heat reduction, Already in the United States Health Security Center Actively lobbying, and alleviating with the support of countries' response, JEE This issue will continue to grow in the foreseeable five to ten years, and countries will continue to invest in activities to build their core health and safety capabilities.

Our country 2016 year 6 month twenty one Day to 7 month 1 Time is complete JEE The assessment shows that my country's concern for health and safety predates WHO The recent move towards the dominant position not only shows the strength of our national defense against the epidemic, but also means our country's participation Sensitivity to global health and safety issues. On this first opportunity, my country should continue to use academic exchange platforms such as Beijing Medical University to communicate The mode of interactive communication between epidemic units, through academic channels, establishes good connections with relevant health and safety units and NGOs in various Department, participate in the future global health security related activities with practical practice.

(2) Of countries JEE External evaluations are all objective evaluations conducted by a team of several external evaluation committees from different countries. Although the evaluation process has other influencing factors, the results obtained through the objective external evaluations should be more objectively presented each National health and security capabilities. Through studying and analyzing the results of the objective assessment, we should be able to understand the core of my country's global health The position and extent of ability compared with other countries in the world. Taiwan on 2016 Year completed JEE Evaluation, in addition to the previous comparative analysis of strengths and weaknesses with the United States, it can be seen that the evaluation scores obtained by developed countries such as Finland and Belgium are By contrast, because most of the projects in the three countries mentioned above are 4~5 Taiwan's score is similar to that of the United States, Finland, Belgium and other countries.

in 4~5 According to the scores, it can be seen that our country has the sound strength of health and safety in the world.

You can also fall on the table below 3 Comparison by item shows that Taiwan's disadvantaged items are less than those of the United States and Belgium, while the U.S. has six items

Lan has four, Belgium has six, and Taiwan has five. The project team proposes to focus on my country's superior and inferior projects

The United States, Finland and Belgium have consolidated their intelligence and capital, and through this year's implementation of the plan, they have cooperated with the United States

Channels to exchange experiences for subsequent strengthening of core competencies.

Table 13. Taiwan and the United States, Finland and Belgium JEE Consolidation table of assessment scores

Numbering	Ability Project	index	United States	Thailand	Finland	Belgium	Taiwan
1	National Legislation, Policy and Financing	P.1.1 Legislation, laws, regulations, administrative requirements, policies or other government instruments in place are sufficient for implementation of IHR.	5	5	4	4	4
		P.1.2 The state can demonstrate that it has adjusted and aligned its domestic legislation, policies and administrative arrangements to enable compliance with the IHR (2005)	5	4	5	4	4
2	IHR Coordination, Communication and Advocacy	P.2.1 A functional mechanism is established for the coordination and integration of relevant sectors in the implementation of IHR.	5	4	4	4	4
3	Antimicrobial pathogens Resistance	P.3.1 Antimicrobial resistance (AMR) detection	4	4	4	4	5
		P.3.2 Surveillance of infections caused by AMR	4	3	4	4	5
		P.3.3 Healthcare associated infection (HCAI) prevention and control programmes	4	3	3	5	4
		P.3.4 Antimicrobial stewardship activities	3	2	4	4	4

Numbering	Ability Project	index	United States	Thailand	Finland	Belgium	Taiwan
4	Zoonotic Disease	P.4.1 Surveillance systems in place for priority zoonotic diseases/pathogens	3	4	5	5	5
		P.4.2 Veterinary or Animal Health Workforce	4	4	4	4	5
		P.4.3 Mechanisms for responding to zoonoses and potential zoonoses are established and functional	4	4	3	4	5
5	Food Safety	P.5.1 Mechanisms are established and functioning for detecting and responding to foodborne disease and food contamination.	4	3	5	5	3
6	Biosafety and Biosecurity	P.6.1 Whole-of-Government biosafety and biosecurity system is in place for human, animal, and agriculture facilities	4	4	3	3	3
		P.6.2 Biosafety and biosecurity training and practices	4	4	3	4	3
7	Immunization national programme	P.7.1 Vaccine coverage (measles) as part of	5	5	4	4	5
		P.7.2 National vaccine access and delivery	5	5	5	5	5
8	National Laboratory System	D.1.1 Laboratory testing for detection of priority diseases	5	4	5	5	5
		D.1.2 Specimen referral and transport system	4	4	5	4	5
		D.1.3 Effective modern point of care and laboratory based diagnostics	5	4	5	4	5
		D.1.4 Laboratory Quality System	5	3	5	4	5

Numbering	Ability Project	index	United States	Thailand	Finland	Belgium	Taiwan
9	Real-Time Surveillance real-time reporting system	D.2.1 Indicator and event based surveillance systems	5	4	4	4	4
		D.2.2 Inter-operable, interconnected, electronic	3	4	4	4	4
		D.2.3 Analysis of surveillance data	5	4	4	4	5
		D.2.4 Syndromic surveillance systems	4	4	4	5	4
10	Reporting	D.3.1 System for efficient reporting to WHO, FAO and OIE	5	3	4	3	5
		D.3.2 Reporting network and protocols in country	4	3	4	5	5
11	Workforce Development other	D.4.1 Human resources are available to implement IHR core capacity requirements	5	4	4	5	4
		D.4.2 Field Epidemiology Training Programme or applied epidemiology training programme in place	5	5	4	4	4
		D.4.3 Workforce strategy	4	3	4	4	5
12	Preparedness developed and implemented	R.1.1 Multi-hazard National Public Health Emergency Preparedness and Response Plan is	5	4	5	2	5
		R.1.2 Priority public health risks and resources are mapped and utilized.	4	2	5	3	5
13	Emergency	R.2.1 Capacity to Activate Emergency Operations	5	3	4	4	5
	Response Operations	R.2.2 Emergency Operations Centre Operating Procedures and Plans1	4	3	4	4	5



Numbering	Ability Project	index	United States	Thailand	Finland	Belgium	Taiwan
		R.2.3 Emergency Operations Programme	4	3	5	4	5
		R.2.4 Case management procedures are implemented for IHR relevant hazards.	3	3	5	5	5
14	Linking Public Health and Security Authorities	R.3.1 Public Health and Security Authorities, (eg Law Enforcement, Border Control, Customs) are linked during a suspected or confirmed biological event	5	4	5	5	4
15	Medical Countermeasures and Personnel Deployment	R.4.1 System is in place for sending and receiving medical countermeasures during a public health emergency	5	4	5	4	4
		R.4.2 System is in place for sending and receiving health personnel during a public health emergency	4	4	5	5	3
16	Risk Communication	R.5.1 Risk Communication Systems (plans, mechanisms, etc.)	4	4	4	5	4
		R.5.2 Internal and Partner Communication and Coordination	5	4	4	4	4
		R.5.3 Public Communication	4	4	4	5	5
		R.5.4 Communication Engagement with Affected Communities	3	4	3	4	4
		R.5.5 Dynamic Listening and RuMor Management	4	4	4	3	4
17	Points of Entry (PoE)	PoE.1 Routine capacities are established at PoE.	4	4	4	3	5
		PoE.2 Effective Public Health Response at Points of Entry	5	3	4	5	5

Numbering	Ability Project	index	United States	Thailand	Finland	Belgium	Taiwan
18	Chemical Events emergencies.	CE.1 Mechanisms are established and functioning for detecting and responding to chemical events or	4	4	4	5	3
		CE.2 Enabling environment is in place for management of chemical Events	5	4	4	5	5
19	Radiation Emergencies	RE.1 Mechanisms are established and functioning for detecting and responding to radiological and nuclear emergencies.	3	4	5	5	3
		RE.2 Enabling environment is in place for management of Radiation Emergencies	3	4	5	3	5

(3) The team continues to mark completed in the summary table JEE The evaluation of the new southbound countries is mainly to understand the development status of the core capabilities of my country's new southbound target countries in global health and safety, and to use the scores in the evaluation report of my country

The comparison process is to analyze the possible entry points of my country's future anti-epidemic cooperation policies. Completed in my country's new southbound target countries

JEE The new southbound countries evaluated are Bangladesh, Sri Lanka, Thailand, Cambodia, Laos and Vietnam. its

China, Thailand, Laos, and Vietnam are the key countries in the analysis of the epidemic prevention cooperation.

by JEE The assessment scores show that Thailand's "biosafety and biological preservation", "chemical incidents" and "radiation emergencies"

The scores of projects such as "software" are better than those of our country, and they are in the action plan of "Developing National Laboratory Energy" and "Epidemic Prevention M

It is currently one of the leading countries, so the project team suggests that my country can develop follow-up dual

Exchanges on border epidemic prevention cooperation. Vietnam's scores mostly fall 3 Compared with my country's score, the health and safety strength is relatively low.

That's enough, the project team recommends sharing my defense epidemic technology and experience as a starting point for cooperation, and implement this year's plan in Quang Nir

The province has established communication channels as a base to conduct education and training activities on epidemic prevention techniques.

( two) GHSA or JEE Activity Information

1.2017 year GHSA or JEE Event information summary

(1) 2017 First of the year GHSA Steering Group ( Steering Group) meeting

- time: 2017.01.21
- Location: Geneva, Switzerland

- Summary of the meeting agenda:

Kim Gang-li, the Deputy Minister of the Ministry of Health of Korea, who took over as the rotating chairman this year ( Ganglip Kim) Serving as conference chairperson, participated

Countries, advisory organizations and non-governmental organizations from Canada, Chile, India, Indonesia, Italy, Saudi Arabia,

United States, European Union, World Health Organization, Food and Agriculture Organization of the United Nations, World Animal Health Organization, World Bank, Next

Generation , Private Sector Round Table , Elizabeth Griffin Foundation Wait. Main meeting report package

Contains: ( 1) 2017 The annual plan report briefly proposes the meetings, venues and topics to be held this year, and previews the second session

The steering group meeting will be held at the World Health Assembly in May, and the next meeting of the steering group will discuss cooperation with the World Health Organization.

The content of the meeting also mentioned that the joint external evaluation report should be implemented and reflected in the country's national plan, otherwise

This assessment will eventually be declared invalid, so this year South Korea proposed a " Track Progress on Commitments" Concept, period

Countries have adjusted their pace to achieve the goals of the various action plans. It is still in the preliminary stage of conception. Representatives of the countries need to express m

A clear specific approach is proposed;( 2) 2016 Summary report of the ministerial meeting of the year; ( 3) Joint external assessment tool progress report, close

to 2017 year 1 Month, already 28 Countries have completed the assessment and are expected to have 31 The evaluation work will be carried out in

each country and will be published after evaluation by representatives of Chile, the United States, Indonesia and Canada; 4) Progress report on the action plan, prepared by the United

Difficulties and suggestions for representatives of Canada, Saudi Arabia and other countries in their progress reports and actual operations; 5) JEE Union

The report of the alliance, reported by the representative of the chairman of the Finnish alliance, the alliance is strengthening the capacity building of inter-departmental cooperation in

And to assist member countries in revising their country's national plans after completing the assessment. The alliance has initially understood that most countries need

Financial support, the establishment of coordination capacity for cross-departmental cooperation, and mentioning that regional cooperation is important for the development of health s

Development is effective; ( 6) Advisory organizations such as World Health Organization, Food and Agriculture Organization of the United Nations, World Animal Health Group

The organization, the World Bank, etc. conducted the latest progress report on the organization's achievements in the action plan.

(2) WHA World Health Assembly:

- time: 2017.05.22 ~ 05.31

- Location: Geneva, Switzerland

- Conference description:

The meeting is divided into three parts, the Health Assembly, Committee A and Committee B.

(1) The agenda items of the Health Assembly are: Next Director-General Election, and other agenda items are the first 139

and 140 Session report and main committee report.

(2) Agenda items of Committee A:

A. Health emergencies are mentioned in the prevention, monitoring and response report project, and WHO has independent plans for health emergencies.

Establish a supervision and advisory committee, and respond to large-scale and serious emergencies, research and development of potential epidemics,

Report on manpower dispatch in emergency situations.

B. Strategic management of drug-resistant microorganisms, international health regulations ( 2005) Implementation status and review of the influenza pandemic prevention framev

report.

C. The Health System Report project mentioned health human resources and the United Nations High-level Committee on Health Employment and Economic Growth

Implementation of the results report, global strategy for solving global drug and vaccine issues, public health, innovation, and the right to know property

Slightly discuss the evaluation and review of the action plan.

D. Member States' handling mechanisms for the problems of inferior quality, counterfeit, improper marking, and counterfeit medical products.

E. The non-communicable disease report project mentioned that it will prepare 2018 The third high-level meeting on the prevention and control of non-communicable diseases

Discussion.

(3) Agenda item of Committee B: Health status report and financial affairs in the occupied Palestinian territories (including East Jerusalem and Syria)

The personnel project report; management, legal and governance matters mention the overview of the implementation of WHO reforms.

(3) 2017 Second of the year GHSA Steering Group ( Steering Group) meeting

- time: 2017.05.21
- Location: Geneva, Switzerland
- Summary of the meeting agenda:

This meeting was hosted by the chairman of the rotating group Jin Gangli ( Ganglip Kim , The Minister of Health of the Republic of Korea) announced the opening, and the Sec

Following 1 After the monthly rotating group meeting, make meeting summary and information update, and propose to participate GHSA List of countries, this time

In addition to the above reports, other agenda activities are roughly divided into:

A. The work plans and progress reports of important meetings and events are as follows:

a. Work Plan for GHSA High-Level Meeting in 2017 (TBA, Uganda)

To be proposed by Uganda GHSA High-Level Meeting The work plan and possible themes, including JEE through

Experience and its improvement.

b. Announcement of New Troika for 2017 (Ganglip Kim, the Republic of Korea)

It will be held by three countries (current South Korea, former Indonesia, and countries not yet on the list) one month before the conference

Video conference to discuss topics, invite speakers and other related topics. c. Regional Activity ( Tentative EU and

ASEAN) .

Two regional representatives will discuss and report how the region is expanded and reached GHSA aims.

B. The information update report is as follows:

a. Update from the Advisors of GHSA (15 minutes for each presentation, Q&A: 10 minutes)

- FAO (Henk Jan Ormel)
- OIE (Susan Corning)
- World Bank (Tim Evans)

- b. Update on JEE Review (Guenael Rodier, WHO)
- c. Model Action Package Approach (Jose Fernandez, the United States, Ok Park, the Republic of Korea)
- d. Update on the Alliance for Country Assessment (Päivi Sillanauke, Finland)
- e. Partnership with Non-Government Stakeholders, Next-Generation, and other Development Organizations: PSRT, PATH, NTI, Open, Next Gen.
- f. Taking Action, Tracking Commitments for Global Health Security (Chaeshin Chu, the Republic of Korea)

(4) ASEAN ( ASEAN) Biosafety Network Conference

- time: 2017.05.22 ~ 23
- Location: Thailand (Nonthaburi)
- Summary of the meeting agenda:

Biosafety and biosecurity are issues of global concern. Canada is GHSA prevention( Prevent) Biosecurity and biological

To protect the leading country, Thailand is to detect ( Detect) Leading countries in the national laboratory system, which also includes

For support. The Global Partnership Program awarded ASEAN Laboratories to provide biosafety engineering and health control solutions to the Thai Ministry of Health. This

Not only promoted Thailand and Canada's GHSA The goal's long-term cooperation is also directly to the ASEAN ( ASEAN) Biosafe

Development has obvious benefits.

Thailand will hold the following activities and invite ASEAN member states to participate:

- A. ASEAN Biosafety Network established
- B. ASEAN member " Biosafety Technology Introduction Course " Workshop
- C. ASEAN member " Biosafety certification course " Workshop

(5) 2017 Third of the year GHSA Steering Group ( Steering Group) meeting

- time: 2017.07.28
- Location: Seoul, South Korea
- Summary of the meeting agenda:

By Kim Gang-li ( Ganglip Kim) Serving as conference chairperson, participating countries, advisory organizations and non-governmental organizations

Organizations are from Canada, Indonesia, Finland, the United States, the World Health Organization, the Food and Agriculture Organization of the United Nations, and the World Movement

Health Organization, World Bank, International Vaccine Institute Wait. This meeting is for the second steering group meeting

The content is summarized and the progress report, South Korea has also announced that it will be this year 8 month 28 Day to 9 month 1 A joint

external review will be conducted on Japan, and the forthcoming 4th Ministerial Conference in Uganda and 2017 The fourth steering group meeting will be held in Italy

Hold. The meetings were organized by consultant teams such as the Food and Agriculture Organization of the United Nations, the World Organization for Animal Health, and the World Health Organization. The meetings were organized by consultant teams such as the Food and Agriculture Organization of the United Nations, the World Organization for Animal Health, and the World Health Organization. Report on the progress of the organization's local assistance action plan, and finally the new consultant team International Vaccine Institute The vaccine research organization reports and introduces the mission and goals of the research organization. As of 7 month twenty one Day, already 52 Countries completed the assessment report, twenty three Countries are going to be assessed and have been GHSA Website announcement 27 Evaluation report of each country.

#### (6) The third GHSA Coordination Meeting of the Action Plan for Human-Animal Infectious Diseases

- time: 2017.08.28~08.30
- Location: Da Nang, Vietnam
- Summary of the meeting agenda:

The 3rd Coordinating Meeting of the Action Plan for Zoonotic Infectious Diseases, 8 month 28 Day to 30 Day was held in Da Nang City, Vietnam. It was co-hosted by Vietnam, Indonesia and Senegal, the leaders of the Action Plan for Human-Animal Infectious Diseases. 200 Bit separately From Asia, Africa, Europe and North America, etc. 16 Country representatives and 16 Representatives of international organizations and domestic organizations participated in this coordination meeting. The meeting focused on strengthening cooperation and sharing the effectiveness of common human and animal diseases such as zoonotic diseases, etc. way.

First review and review the past two years in Vietnam ( 2015) With Indonesia ( 2016) Key explanations and achievements of the coordination meeting Report and put forward suggestions for amendments, and report to all participants in order to reduce the spread of communicable diseases between humans and animals, and emphasize Coordinating the latest progress of prevention, detection and response capability targets, and explaining the future course of action to newly participating countries and organizations to. The two-day meeting assembled the World Health Organization ( WHO) , World Organization for Animal Health ( OIE) , Vietnam, Cambodia, Finland, International organizations and countries such as the Netherlands, Côte d'Ivoire (Ivory Coast), Senegal, Congo, Zimbabwe and Indonesia targeted this action The plan carries out experience sharing and exchanges at different levels, which will be confirmed in the meeting 2018 Senegal will host the next coordination meeting in And discuss this year 10 Is it necessary for the ministerial meeting in Uganda to take action against zoonotic diseases when the meeting is held? The plan handles related activities, and at the conclusion of the meeting, the focus of the meeting and the updated global strategic plan and action for zoonotic diseases The program coordination mechanism for compilation and reporting.

#### (7) Fourth GHSA Ministerial Conference ( High Level Ministerial Meeting)

- time: 2017.10.25~10.27
- Location: Kampala, Uganda
- Summary of the meeting agenda:

GHSA Ministerial Conference participated in Africa for the first time GHSA The most active and successful country Uganda hosted the conference. Titled " Health Security for All : Engaging Communities, Non-governmental Organizations, and the Private Sector ", so the content of this conference will focus on the participation of communities, non-governmental organizations and private axis. Another event of this meeting was the joint release of a statement on promoting global health security led by Uganda's representatives of participating countries.

Steering group and member states and future participation GHSA Of countries and institutions, expected in 2018 Ministerial Conference

Propose a specific target proposal formulated through joint consultation. The first day agenda is 1. The current global health security threats GHSA

The progress made was confirmed by representatives of Uganda and South Korea GHSA Conduct retrospective reports and report on the country's participation GHSA So

Actions taken, results and challenges; 2.2018 year GHSA The future direction and stable financial sources are discussed in an open way

get on 2018 The direction of the year and the formulation of domestic investment and financing strategies to achieve the goal of stable financial sources; 3. Simulation exercises and

Technical poster published. The next day's agenda is 1. Highlight GHSA Unique, by the African Regional Office of the World Health Organization

Representatives report on the progress of the African Region on joint external assessment tools, national action plans, and risk assessment plans; 2. Such as

How to involve private companies, charities and non-governmental organizations GHSA ,by GE Foundation and Johnson & Johnson

Global Public Health Representative reports; 3.GHSA For the future direction, this part of the content is not available in the briefing file, so it is impossible

to summarize the content.

Table 14. 2017 Year to 2018 year GHSA or JEE Meeting and event information summary table

date	conference
2017.01.21	Held in Geneva, Switzerland 2017 First of the year GHSA Steering Group ( Steering Group) meeting
2017.02.07~02.08	Strengthening the development of manpower for epidemic prevention held in Bangkok, Thailand 4 Annual work plan meeting
2017.05.20~05.31	70th World Health Assembly held in Geneva, Switzerland <ul style="list-style-type: none"> <li>JEE Alliance meeting</li> <li>GHSA second round GHSA Steering Group ( Steering Group) meeting</li> </ul>
2017.07.26~27	World Health Organization Conference in Seoul, South Korea Conference theme: Delivering Global Health Security through Sustainable Financing
2017.07.26	Energy Video Conference of the Development National Laboratory held in Bangkok, Thailand
2017.07.28	The third event held in Seoul, South Korea GHSA Steering Group ( Steering Group) meeting
2017.08.28~08.30	The third held in Da Nang, Vietnam GHSA Coordination Meeting for the Management of Zoonotic Infectious Diseases
2017.10.25~10.27	The 4th held in Kampala, Uganda GHSA Ministerial Conference ( High Level Ministerial Meeting)
2017.12.04	The fourth show held in Rome, Italy GHSA Steering Group ( Steering Group) meeting
2018.02.05~02.07	Regional Conference on Development of National Laboratory Energy and Anti-epidemic Manpower in Bangkok, Thailand

2. against GHSA Analysis of the website's main activities list and policy recommendations for epidemic prevention cooperation

From the above table 2017 and 2018 year GHSA or JEE Consolidation of conference and event information. In the process of collecting the above information, research

Based on the collected information analysis, the research team can obtain the following 4 The results of the project and policy recommendations related to my country's future cooperation

(1) At the 4th Ministerial Conference, Uganda led representatives of all countries to take an oath to reaffirm the commitment to global health and security.

All countries agree that the establishment of prevention, surveillance, and response capabilities is extremely important, and it is essential to protect their people from infectious diseases

Infectious diseases, natural disasters, etc. have a high degree of consensus. It is believed that by participating GHSA , To enhance cooperation between domestic government and NGOs

Work is an important method to maintain the stability of social and economic benefits. This ministerial meeting is also for the future 2024 Years ago GHSA

The specific proposal is in progress according to the scheduled schedule. The above shows how to enable countries to develop their core capabilities and investment in a sustained and

Participate GHSA All 2018 This year's focus is on issues, so our country should also have a sustainable plan for continuous investment, especially the

ministerial meeting next year should also operate as soon as possible.

It also mentioned how to maintain stable financial sources in the future to support the development of subsequent related activities. agreements) Such as:

" 2030 Agenda for Sustainable Development " , " World Health Organization (WHO) International

Health Regulations 2005 (IHRs) " , " Codex Alimentarius International Food Standards " , " Sendai

Framework for Disaster Risk Reduction " , " World Organisation for Animal Health (OIE) Performance of Veterinary Services "versus" Biological

Weapons Convention "The implementation of the above-mentioned agreement

Implementation of the meeting to participation in the future GHSA The development is very influential. It is recommended to have a more in-depth study and analysis of the above agreement

(2) GHSA The summary of activities shows that its important routine meetings include steering group meetings, ministerial meetings, and various action plan leading countries.

Leading regional meetings, but given that GHSA The website updates relevant activity information from time to time, and some activities are not until the completion of the process

Publish relevant information on the website for reference. Understand that the focus of the above meeting information is not just to participate in the meeting now and after the meeting

For information, the preparatory work before the start of the conference is the most important stage where we can participate and exert our strength. Plan to execute this year

In the process, the project team has cooperated with the United States, Singapore, Thailand, Malaysia, South Korea, Vietnam and Indonesia. GHSA Related

Officials and experts establish bilateral connection channels and interact with officials and experts from various countries in this year's cooperation model. Let us

It is determined that the participation method connected with academic institutions is the most acceptable and effective method of global health participation at present,

Therefore, the project team recommends that my country continue to participate in academic channels, interact with other countries, and establish a more stable second-track exchange

Tao, and hope to know in advance through this model GHSA Related activities and other information to participate in related activities more substantively.

(3) Known from the venues and leading staff around the world, GHSA The steering group chairs are in Canada, Chile, Finland,

India, Indonesia, Italy, Kenya, Saudi Arabia, South Korea and the United States, in GHSA Play an important role in the development of its

China, the United States, South Korea and Indonesia, through the implementation process of this year's plan, and GHSA The gathering of activity information is to establish epidemic prevention

Communication connection channel.

Participation of key epidemic prevention cooperation countries in this plan GHSA The situation, and its role in the action plan, through activities and

JEE The assessment report and other information content shows that the new southward countries such as Indonesia and Vietnam have led the action plan for the management of zoonotic

One of the leading countries; Thailand is one of the leaders of action plans for the development of national laboratory energy and epidemic prevention manpower development; Malaysia



One of the leaders of the action plan for establishing an emergency response command center; 2017 The steering group for

Link public health and legal professions, inter-ministerial

One of the leading countries in the rapid response plan. The project team recommends that the above information be communicated on the northern medical technology platform

Research with the new southbound target country to develop an initial joint development strategy for epidemic prevention cooperation.

(4) Associate Professor Cai Fengzhen, the co-host of this project, will 2018 year 1 month 29 Day to 2 month 3 Day, went to Thailand to participate by

Prince Mahidol Award Conference (PMAC) The annual health policy-related international conference, the theme of this year's Making the

World Safe from the Threats of Emerging Infectious Diseases " ,A known GHSA importance

Characters will be there. And this project is also GHSA The website found that Thailand will 2018 year 2 month 5 Day to 7 Held "Regional Conference on

Development of National Laboratory Energy and Epidemic Prevention Capacity" in Thailand GHSA Determination and strength to play an important role in

In addition, this year's plan implementation process will 11 Invited to the Deputy Director of the Thai Disease Control Agency Dr. Tanarak Plipat And the

Ministry of Epidemiology of Thailand, IHR Senior officials of the capacity development team Miss Kiratikarn Kladsawad With the leader of the sixth group of

the disease prevention and control group of the Thai CDC Dr. Hansa Ruksakom , To visit Taiwan and participate in international forums. Therefore, the team

suggested that my country should cooperate with Mathieu University in Thailand to further continue to interact with Thailand to strengthen my country's GHSA

Participation and contribution in the global network.

### 3. Summary of this section

Since the implementation of this plan, monthly work reports will be submitted every month, and the content will be collected and summarized for the implementation of the plan

Description of the progress of handling international forums, foreign invitations/visits, handling of expert consultation meetings, and other special proposals related to the plan

Gathered into a booklet for the contents of the matters discussed in the month, GHSA The dynamic contents of the website are event information and JEE Information

compilation and update of the assessment report.

#### (1) JEE Evaluation report

global 189 Of countries, 2016 Since the year 43 Country complete JEE Evaluation report, twenty four Country is about to 2017

Year completed JEE Evaluation, it is expected that there will be 67 Countries in 2018 Completed years ago JEE Evaluation report, so global 189

Out of 2017 At the end of the year JEE The assessment completion rate will be 35% . Collecting JEE During the evaluation report, the research team

analyzed the collected information and obtained the following 3 The results of the project and policy recommendations related to my country's future cooperation in epidemic prevention

A. The plan was originally GHSA Announced on the website JEE The assessment report is the source of information, collect, analyze and count JEE Evaluation

Development, but when the team wrote the final report, GHSA The website has been changed to World Health Organization ( WHO) Website announcement

JEE The published report is the updated benchmark. by WHO Website and GHSA The links and developments made on the website show that global health

The issue of safety, its importance in the field of global health, and the WHO The determination and

Hard work. And from this topic trend, we can see that the original US GHSA Experts in the Global Health University Alliance ( CUGH) research

During the seminar and several subsequent discussions with the members of the research team, about US President Trump's 2017 year 1 month 20 Take office

Later, taking a wait-and-see attitude towards the World Health Organization and international health affairs may lead to global participation GHSA Heat cut  
Concerns have been in the United States Health Security Center Actively lobbying, and alleviating with the support of countries' response, JEE This  
issue will continue to ferment in the foreseeable five to ten years, and countries will continue to invest in building their core health and safety capabilities  
Activity.

Our country 2016 year 6 month twenty one Day to 7 month 1 Time is complete JEE The assessment shows that my country's concern for health and  
safety predates WHO The recent move toward the dominant position not only shows our country's strength in fighting the epidemic, but also means our country's participation  
Sensitivity to global health security issues. On this opportunity, my country should continue to use academic exchange platforms such as Beijing Medical University to communica  
A model of interaction and communication between domestic epidemic prevention units, established through academic channels with relevant health and safety units and non-g  
Good connections and practical participation in future global health security related activities.

B. Of countries JEE External evaluations are all objective evaluations conducted by a team of external evaluation committees from different countries.

Although there are other influencing factors in the evaluation process, the results obtained through the objective external evaluation should be more objectively presented  
The health and security capabilities of countries. Through studying and analyzing the results of the objective assessment, we should have a better understanding of my country's  
The position and extent of core competence in comparison with other countries in the world. Taiwan on 2016 Year completed JEE Evaluation, in  
addition to the previous comparative analysis of strengths and weaknesses with the United States, and the evaluations obtained by developed countries such as Finland and Bel  
The scores are compared with each other, because most of the above three countries fall in 4~5 Scores, Taiwan scores and the United States, Finland, Belgium and other countr  
Similar to 4~5 According to the scores, it can be seen that our country has the sound strength of health and safety in the world.  
Can also fall on 3 Comparison by item shows that Taiwan's disadvantaged items are less than those of the United States and Belgium, the U.S. has six items, and Finland  
There are four, Belgium has six, and Taiwan has five. The project team proposes to focus on my country's superior and inferior projects  
The United States, Finland and Belgium have consolidated their intelligence and capital, and through this year's implementation of the plan, they have cooperated with the Unite  
Flow channels, and exchange experiences for subsequent strengthening of core competencies.

C. The team continues to mark completed in the summary table JEE The assessment of the new southbound country is mainly to understand our country's new southbound

The development status of the core capabilities of the target country in global health and safety, and the scores in the evaluation report of my country  
Through the process of comparison, we will analyze the possible entry points of our country's future cooperation policies on epidemic prevention. Completed in my country's new  
to make JEE The new southbound countries evaluated are Bangladesh, Sri Lanka, Thailand, Cambodia, Laos and Vietnam.  
Among them, Thailand, Laos, and Vietnam are the key analysis countries for cooperation in epidemic prevention.  
by JEE The assessment scores show that Thailand is in the "Biosafety and Biosecurity" , "Chemical Incident" and "Radiation Emergency"  
The scores of projects such as "ware" are better than that of our country, and they are in the action plans of "Developing National Laboratory Energy" and "Epidemic Prevention  
The project is one of the leading countries, so the project team suggests that our country can take advantage of the above-mentioned Thailand's advantages or lead the project.  
Continue bilateral exchanges on epidemic prevention cooperation. Vietnam's scores mostly fall 3 Compared with my country's score, the health and safety strength is  
Relatively insufficient, the project team recommends sharing my defense epidemic technology and experience as a starting point for cooperation, and implement this year's plan  
Quang Ninh Province, Vietnam has established a communication channel as a base to carry out education and training activities on epidemic prevention technology.

## (2) GHSA or JEE Activity Information

- 2017 and 2018 year GHSA or JEE Consolidation of conference and event information. In the process of collecting information, the research team analyzes the collected information and can obtain the following 4 The results of the project and policy recommendations related to my country's future cooperation in epidemic prevention and control.
- A. At the 4th Ministerial Conference, Uganda led representatives of all countries to take an oath to reaffirm the commitment to global health and security.
- All countries agree that the establishment of prevention, surveillance and response capabilities is extremely important, and it is essential to protect their people from infectious diseases. Infectious diseases, natural disasters, etc. have a high degree of consensus, and believe that by participating GHSA , To promote mutual cooperation between domestic governments. The cooperation is an important way to maintain the stability of social and economic benefits. This ministerial meeting is also for the future 2024 Years ago Of GHSA The specific proposal is in progress according to the scheduled schedule. The above shows how to make countries continue to develop their Core competence and investment participation GHSA All 2018 Focused on issues in the year, so our country should also have a continuous investment Into the sustainable plan, especially the ministerial meeting next year, should also operate and participate as soon as possible.
- It also mentioned how to maintain stable financial sources in the future to support the development of subsequent related activities. agreements) Such as:" 2030 Agenda for Sustainable Development ", " World Health Organization (WHO) International Health Regulations 2005 (IHRs) ", " Codex Alimentarius International Food Standards " , " Sendai Framework for Disaster Risk Reduction " , " World Organisation for Animal Health (OIE) Performance of Veterinary Services "versus" Biological Weapons Convention Zhi Zhi
- OK, we can see that the implementation of the above agreement will affect the future participation GHSA The development is very influential. It is recommended to have more in-depth Reading and analysis.
- B. GHSA The summary of activities shows that its important routine meetings include steering group meetings, ministerial meetings, and various action plan leading countries.
- Leading regional meetings, but given that GHSA The website updates relevant activity information from time to time, and some activities are completed after processing The relevant information was released on the website for reference only later. Understand that the focus of the above conference information is not just the current participation in the meeting. For the information after the meeting, the preparatory work before the start of the meeting is the most important stage where we can participate and exert force. this year During the execution of the project, the project team has cooperated with the United States, Indonesia, Thailand, Vietnam, Malaysia, Singapore, South Korea and Belis et al GHSA Relevant officials and experts have established bilateral communication channels, and used this year's cooperation model with officials from various countries The process of expert interaction has allowed us to determine that an academic institution's approach to participation is the most acceptable and most acceptable to everyone. Effective global health participation methods, so the project team recommends that my country continue to participate through academic channels to interact with other countries To establish a more stable second-track communication channel, and hope to know in advance through this model GHSA Related events and other information to More substantial participation in related activities.
- C. Known from the venues and leading staff around the world, GHSA The steering group chairs are in Canada, Chile, Finland, India, Indonesia, Italy, Kenya, Saudi Arabia, South Korea and the United States, in GHSA Play an important role in the development of Among them, the United States, South Korea and Indonesia have gone through the implementation process of this year's plan, and GHSA The activity information collection is essential Communication channels for epidemic prevention.
- Participation of key epidemic prevention cooperation countries in this plan GHSA Situation, and its role in the action plan,

Move and JEE The assessment report and other information content shows that the new southward countries such as Indonesia and Vietnam are

One of the leading countries in the action plan; Thailand is one of the leading countries in the action plan for the development of national laboratory energy and epidemic prevention

Malaysia is one of the leaders of the action plan for the establishment of an emergency response command center; 2017 Year Steering Group Round

The chairmanship is also one of the leaders of inter-departmental rapid response plans to link public health and legal professions. This project

The team recommends that the above information, and the exchange mode of the North Medical Technology Platform, and the new South-bound target country are initially planned

The strategy of cooperation in epidemic prevention.

D. Associate Professor Cai Fengzhen, the co-host of this project, will 2018 year 1 month 29 Day to 2 month 3 Day, went to Thailand to participate by

Prince Mahidol Award Conference (PMAC) The annual health policy-related international conference, the theme of this year's Making the  
World Safe from the Threats of Emerging Infectious Diseases " ,A known GHSA of

Important people will be there. And this project is also GHSA The website found that Thailand will 2018 year 2 month 5 Day to 7 Held "Regional

Conference on Development of National Laboratory Energy and Epidemic Prevention and Response Thailand GHSA Plays an important role in

Heart and strength. In addition, during the implementation of this year's plan, the Deputy Director of the Thai Disease Control Agency was invited in June and November Dr.

Tanarak Plipat And the Ministry of Epidemiology of Thailand, IHR Senior officials of the capacity development team Miss Kiratikarn Kladsawad With

the leader of the sixth group of the disease prevention and control group of the Thai CDC Dr. Hansa Ruksakom , Come to visit Taiwan

Participate in international forums. Therefore, the team suggests that my country should cooperate with Mathieu University in Thailand to further continue to cooperate with Thailand

Interactive exchanges to strengthen our country's GHSA Participation and contribution in the global network.

Three, through JIE Sharing and helping a new partner development and cooperation and mutual platform with the new South

( A) Vietnam

Establish key epidemic prevention and colonization cooperation with the new South Asian countries. One of the first target countries is Vietnam. Three foreign guests from Viet in 10 month 4 Day to 7 Visit and exchange on 10 month 6 Meeting with Director Zhou Zhihao and Deputy Director Luo Jun on the day, targeting the country TB , Dengue Fever Conduct briefings, analyze the current situation, and provide opportunities to communicate with vaccine laboratories, as shown in the table As shown in 14th, after the itinerary of the CDC, Dean Guo Naiwen also arranged 3 A foreign guest went to the seminar of the Taiwan-Vietnam Exchange Association Ci and a visit to a vaccine company in Central China to achieve a link with the industry.

Table 15. Vietnam TB , Dengue Fever Current situation analysis

越南	
項目	現況及需求
TB tuberculosis	1. Expensive treatment 2. Poor health education: media, funding, tuberculosis knowledge, etc. 3. Insufficient human resources for tuberculosis prevention 4. Shortage of government funds
Dengue Fever dengue	1. No vaccine available 2. There is no effective treatment for dengue fever 3. Difficulties in providing funding and dengue education to the public.



Figure 13. Group photo of Vietnamese foreign guests and the Director of the CDC



Case 2011 Year 39 People increase to 2017 Year 207 people.

2. Dengue fever prevention information: about 129,435 People, nearly three years 2015-2017 Annual incidence rate 48.49% , 43.4 as well as

16.8% , The fatality rate is 1.56 , 1.46 as well as 1.62% It also showed that the country's activities to promote the prevention and treatment of tuberculosis and dengue fever in the community, and mentioned that the country's low education standards and living habits will affect the effectiveness of its promotion.

3. my country responds WHO of 2035 Can the plan to eliminate tuberculosis arrive early 2030 The question of the year is as follows: Taiwan's national health

Insurance coverage rate is as high as 99% Above, any cases of tuberculosis and reported cases can be tracked systematically and cooperated

DOT Plan that someone will deliver medicine TB Cases, to increase the cure rate have greatly improved the effectiveness of tuberculosis control.

4. What is the time and timing of the implementation of my country's response to vector control? When the epidemic breaks out, can there be other associations and other organization

Assisting in the control of epidemics and other issues are as follows: vector control is divided into three parts, namely environmental, biological and chemical control

The part of strategy, environment, and biological control is used when a case or an epidemic has not yet erupted.

The treatment strategy is to remove disease vectors by cleaning up water containers and feeding mosquito fish. When an epidemic breaks out, chemical control will be used.

Spray insecticides in epidemic areas to further control the disease. When faced with a major outbreak like the previous year, the central government

And local organizations and hospitals will support each other, and hire or recruit volunteers to help clean up water containers in endemic areas.

When necessary, relevant medical associations/societies or hospitals in other regions will also be asked to assist in diagnosis and treatment of cases (their medical staff will be Training).

5. Whether it's dengue fever or tuberculosis, you can follow Case prevention , Case finding ,as well as Case management Wait

Three aspects of the prevention and control of infectious diseases, and mastering the details of the three aspects will help control the epidemic.

Through mutual exchanges, Central Java Province is looking forward to having further cooperation opportunities with Chinese government agencies in the future and signing co

And bring Taiwan's control technology into the country.





Figure 15. Photo of Indonesian foreign guests visiting the tuberculosis center of Wanfang Hospital



Figure 16. Foreign guests from Indonesia and the University of Malaya Dr. Wah-Yun Low Group photo with Beijing Medical team

### ( Three) Epidemic prevention cooperation and training platform

In order to enhance our national defense capabilities and enhance international cooperation in epidemic prevention, our team has sent personnel to visit Southeast Asian countries. JEE and GHSA Action plan ( Action Package) The strategic model of establishing an epidemic prevention technology transfer center with the CDC, and establishing Contact the platform to deepen international cooperation. Currently, the project host, Professor Guo Naiwen, and the planners are visiting Indonesia to negotiate with Vietnam To consolidate bilateral relations, according to the situation, send personnel to visit.

In order to increase the training opportunities of our national defense personnel, and to exchange and share experiences with scholars and experts from other countries, this team Invite foreign scholars, experts and officials of disease control agencies to come to Taiwan for sharing and exchanges. The team used the opportunity to visit Visit in person, or seek suitable candidates and arrange visits by phone, video or email. Currently invited

The status of the plan is as follows:

1. Singapore: Singapore is expected to invite two people. Dean Xie Jicheng of the School of Public Health, National University of Singapore 5 Month visit, Director of the Singapore Department of Disease Control Vernon JM Lee Already at 7 Visited in January, School of Public Health, National University of Singapore Dr. Clarence Tam Professor has been 11 Visited the Taipei International Forum and Round Table Conference for a total of three times.
2. Thailand: Thailand is expected to invite two times, Deputy Director of the Thai Disease Control Agency Tanarak Plipat With epidemic prevention experts Keratikarn Kladsawas Already at 6 Visited in December, Deputy Director of the Thai Disease Control Agency Tanarak Plipat Thailand's Department of Disease Control



- Prevention and Control Group VI Dr. Hansa Ruksakom Team leader 11 Visited again this month to participate in the Taipei International Forum and Round Table Conference, a total of four people.
3. Malaysia: Malaysia is expected to invite two people, University of Malaya Wah-Yun Low Professor has been 9 Visit this month
- The school serves as a short-term visiting professor, an official of the Malaysian Ministry of Health Dr. Tam Jenn Zhueng in 11 Visited and participated in the Taipei International Forum and Round Table Conference, a total of two people.
4. United States: The United States is expected to invite two times, Next Generation Network principal Dr. Jamechia Hoyle With vice chairman Dr. Taylor Winkiem in 11 Visited and participated in the Taipei International Forum and Round Table Conference, a total of two people.
5. Indonesia: Indonesia is expected to invite four people, and the host of the project, Professor Guo Naiwen, will cooperate with the planners in Yogyakarta, Indonesia AlmaAta After contacting the university, he invited Central Java Province ( Central Java) Epidemic prevention experts and officials visited.
6. Vietnam: Vietnam is expected to invite four people, Director of Health Department of Quang Ninh Province, Quang Ninh Province CDC Director and Tuberculosis in Quang Ninh Province The Dean of the Chest Hospital 10 There were three visits in the month. Although the number of invitations has not reached the expected number of invitations, this invitation Establish a preliminary consensus on the follow-up bilateral cooperation in epidemic prevention technology transfer centers.
7. Belize: Belize is expected to invite one person. Belize's disease control agency officials have already 11 Participate in Taipei Field Country International forums and round tables, a total of one person.
8. South Korea: Although it is not included in the number of invitations expected in this plan, because South Korea is 2017 year GHSA The chairman of the steering group, this invitation Please visit Yonsei University Dr. Joshua Sir Professor for planning implementation GHSA The public health personnel training window, and Dr. Joshua Sir Professor and Chairman of the Korean Steering Group and Executive GHSA Relevant officials, experts and scholars have close contact, so we invite to 11 Participated in Taipei International Forum and Round Table Conference
9. Indonesia: Indonesia is expected to invite four people. Due to the impact of the Indonesian earthquake, the last visit will be the CDC of the Central Java Provincial Department of Health Sigit Armunant Director and Community Health Center Mrs. Suharsi Director Yiyu 12 Month visits, total 2 people
- This time, although it has not reached the expected number of invitations, this invitation has already cooperated with the subsequent bilateral epidemic prevention technology transfer centers. Establish a preliminary consensus.

( Four) Summary of this section

Since the implementation of this plan, the Beijing Medical team has provided an opportunity for different identities in the department to build epidemic prevention cooperation with Linking up people's contacts for epidemic prevention in various countries; after several visits and exchange visits, the countries that have successfully deepened the transfer of epidemic prevention technology and equipment are Nepal, my country is TB , Dengue Fever The epidemic prevention of the country has an international level. It analyzes the current situation and needs of the country, and summarizes the following key points: hygiene conditions and knowledge, epidemic prevention technology and equipment and equipment, such as the future Discussions on cooperation will reach an opportunity for transnational cooperation in epidemic prevention and colonization.

#### 四、舉辦跨領域產官學研策略規劃會議並發展合作策略路徑圖

In order to implement the health and safety goals of integrated epidemic prevention, this plan is aimed at JEE Three then the final report:

disease "Antibiotic resistance" , "Biosafety and Biosecurity" , To convene three strategic plans for cross-industry, government, academic and research fields

Domestic expert consultation meeting to discuss improvement plans on three topics. After consolidating expert suggestions and document verification, the domestic

After the round-table discussion and consultation meeting of foreign experts, after the exchange of international experience and opinions, the comprehensive experts suggested that the

Form the strategic road map and include it in the final report for the reference of commissions and agencies. The implementation process is shown in Figure 14.

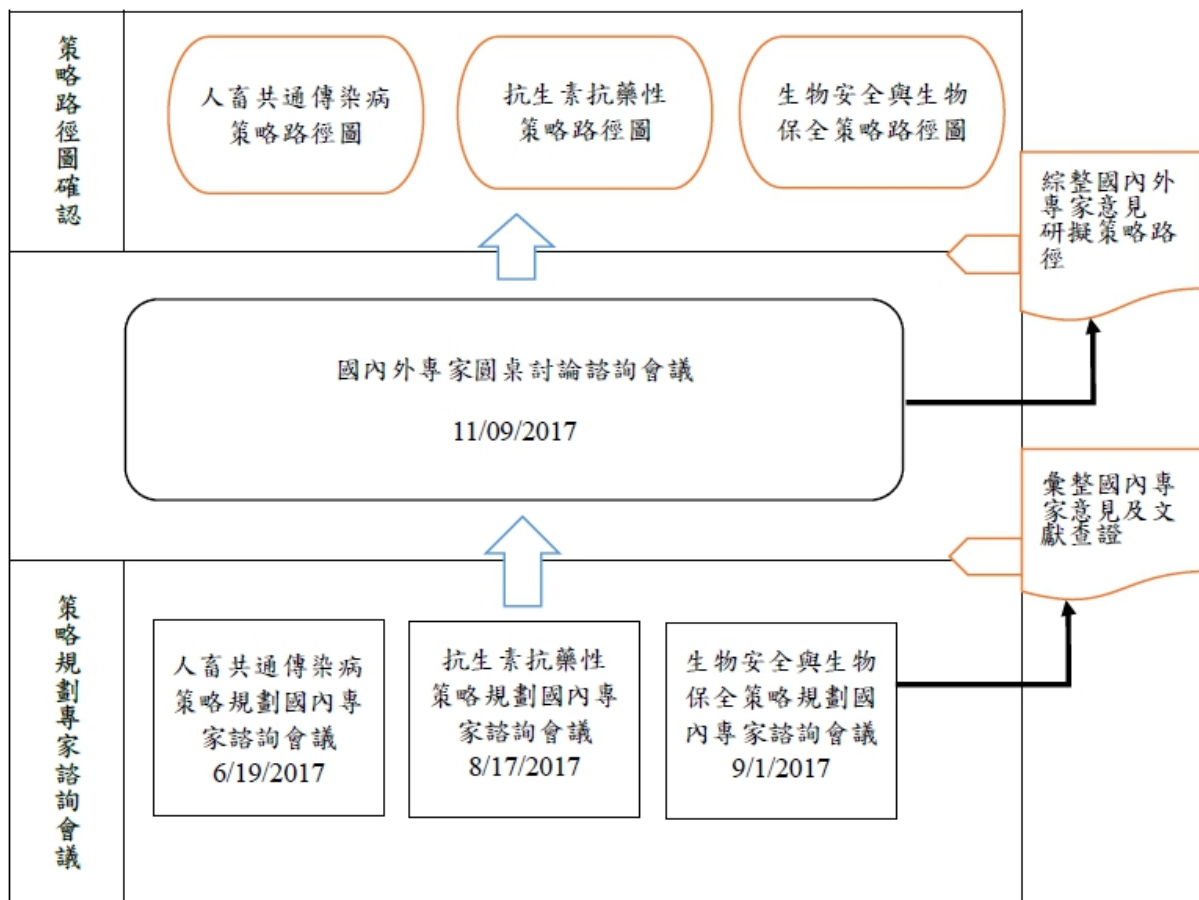


Figure 17. Flow chart of strategic planning meeting

( 1) Zoonotic infectious diseases

Expert response JEE The suggestion and JEE The opinions other than the suggestions are as follows:

- Response JEE Suggested part

1. The formulation and implementation of an integrated epidemic prevention policy can help clarify the role of the central, regional and local governments, thereby promoting animals and

The integration of public health preparation, monitoring and response.

Expert opinions are as follows:

(1) Currently the Bureau of Inspection and Quarantine has carried out 106-109 The integrated research plan for epidemic prevention will improve human resources.

(2) Due to local autonomy and local human and financial constraints, some central policies cannot be thoroughly implemented in localities.

(3) It is advisable to establish a separate animal protection unit to separate animal epidemic prevention and animal protection services.

2. Establish a seamless connection between human health and monitoring systems so that the Disease Management Agency and the Council of Agriculture can automatically share all

Health information.

Expert opinions are as follows:

The Bureau of Inspection and Quarantine has established five important human-animal infectious disease surveillance systems, and the farmers and health authorities have also est

Rationale KM) System, but it just didn't upload the data. It is recommended that you can use the "Prevention" for the fields in the existing databases of both parties.

Epidemic Cloud" structure, and based on XML Format for automatic exchange of related information.

3. Provide additional training for personnel of local and regional agricultural institutions, and provide assistance to veterinarians, animal health personnel, human epidemiologists and p

The personnel of the health organs offer integrated training courses for epidemic prevention.

Expert opinions are as follows:

(1) The Bureau of Inspection and Quarantine has won 106-109 The annual epidemic prevention plan is expected to follow the CDC model for personnel training.

(2) It is recommended to recruit so-called "seal troops" , To serve as human support for the temporary outbreak of the epidemic.

(3) The CDC should exchange personnel with the Bureau of Prevention and Inspection for a "short-term practical use" with each other's operating systems.

(4) Establishing local prevention and treatment centers for new recruits in pre-employment training, should be included in epidemiology courses and practices to facilitate direct po

Apply what you have learned to the supervisor's business immediately.

(5) Suggest that Taiwan can refer to GHSA The number of medical and veterinary talents is determined in proportion to the standards of

(6) It is recommended that the CDC add talents with a veterinary background, which will help interpret the messages from the farmers and make correct interpretations.

Read and respond.

- JEE Expert opinions other than suggestions

1. National legislation, policy and finance

(1) The current public service system in my country has not planned the career development path for the personnel who are engaged in the local health survey ( career path) ,

This part depends on the intervention and support of the central unit.

(2) Most of the farmer's funds are used for compensation, and when announcing whether the disease will be eliminated or not, the economy and market consumption must be con

As a result, the timeliness of some actions is not as good as expected.

## 2. coordination

The horizontal communication between units should be smoother. For example, the Bureau of Inspection and Quarantine is an administrative unit, and its data source is a national

The smooth communication between the two parties will help the transmission of information.

## 3. monitor

(1)H7N9 The avian influenza virus can be a topic of cooperation between farmers and the CDC, making Taiwan a world surveillance mainland H7N9

The most important stronghold.

(2) Both high pathogenicity and low pathogenicity poultry influenza should be collectively referred to as "poultry influenza". The sensitivity of monitoring indicators

The sensitivity should be good enough, and the monitoring results can be timely assessed for risk.

(3) It is suggested that a mechanism similar to the whistle blowing clause can be established to encourage farmers to report.

## 4. strain

When an outbreak occurs, the Freshwater Livestock Sanitation Laboratory may not be able to handle it. At this time, the school laboratory can be called for support.

## 5. Prepare

Students with a medical or veterinary background in the medical school or veterinary school can be used as reserve personnel for the outbreak

Time support manpower.

## 6. Risk communication

In the tourism industry currently proposed in the country, there are news reports that during parent-child amusement activities, milk is drunk on the spot.

Bacillus causes the risk of bovine tuberculosis infection. We must face up to the changes in the time and space environment, so that the distance between humans and animals be

The closer it is, the problem of cross-infection is caused.

## 7. Cooperation in epidemic prevention

It is recommended that Japanese encephalitis ( JE) It is also included in the list of epidemic prevention cooperation between agriculture and health.

### ( 2) Antibiotic resistance

Expert response JEE Suggest and JEE The opinions other than the suggestions are as follows:

#### • Response JEE Suggested part

1. Taiwan should further establish a national antibiotic management. Although Taiwan has 2013 A national antibiotic management plan was launched in

However, evidence shows that there are still considerable differences in the use of antibiotics in various medical institutions. Consider the plan 2013 Promoted since

It may not have reached the full impact. Effective data collection and analysis will help to review and adjust this plan in the future.

Expert opinions are as follows:

(1) At present, the Chinese Society of Infectious Diseases and the American Association for Clinical and Laboratory Standards ( CSLI) Have formulated guidelines for the use of a

However, the compliance of doctors is different, and improving the compliance of doctors with the guidelines is the direction that must be worked hard.

(2) To reduce medical care-related infections, we can start from two aspects: "reducing pipeline-related infections" and "environmental cleaning and disinfection".

In addition, the practice of nosocomial infection control can be further brought into community care.

(3) Hospitals can set up a reward system to strengthen the implementation of antibiotic management plans.

(4) The quality of infection control in regional hospitals varies greatly. Hospitals prevent carbapenem-resistant enteric bacteria (CRAB). The key to dissemination

It lies in hand washing, frequent hand washing can reduce the use of antibiotics, which will greatly help the control of medical costs.

## 2. Taiwan should improve food-borne pathogens and AMR Links between microbial monitoring mechanisms

Expert opinions are as follows:

(1) The Bureau of Inspection and Quarantine, the Department of Disease Control, and the Food and Drug Administration have implemented the inter-ministerial meeting of "Integrating

"Testing the Protection Net Project", which has jointly established Salmonella PFGE Database, collected from human Salmonella

Bacterial strains isolated from food poisoning, as well as the strains isolated from the monitoring of microorganisms on the surface of carcasses from the slaughterhouse.

Salmonella strains; when there is an outbreak of food-borne diseases, if the database can be directly used for cross-comparison, it can be clarified in time

Whether the food poisoning case is related to the raw materials of animal products.

(2) The Bureau of Prevention and Inspection, the Department of Disease Control, and the Food and Drug Administration have established the "Project Manager Program" as a platform

Every position has a dedicated contact window.

(3) The Bureau of Inspection and Quarantine monitors the meat of listed animals, and the pass rate is about 99%. Above, there are relatively few drugs containing drugs due to animal

Antibiotic resistance due to feed additives.

## 3. Taiwan should consider expanding animal AMR Testing (before the animals are sent to the slaughterhouse) to ensure AMR Can be traced back to the farm.

Expert opinions are as follows:

(1) According to the guidelines of the World Animal Health Organization's Terrestrial Animal Code, the Bureau of Inspection and Quarantine is currently targeting disease-infected

Surveillance, the practical approach is that when a disease occurs in an animal on a livestock farm, if pathogenic bacteria are isolated after diagnosis and treatment by a veterinarian

Sensitivity tests will be conducted for pathogenic bacteria instead of surveillance.

(2) At present, scholars in Taiwan have conducted drug resistance tests on the pasture side and wiped out the bacteria when the animals were transported out of the pasture.

(3) Different farms or farmed animals will have different drug resistances, so we need to take account of the differences in individual cases.

Discussion.

- JEE Expert opinions other than suggestions

## 1. Slaughterhouse monitoring

(1) The Bureau of Inspection and Quarantine has carried out microbiological monitoring for carcasses, mainly for pathogenic bacteria and salmonella. Not on the farm side

Because some animals are still being treated, monitoring is of little benefit. The main thing is to choose healthy animals in the slaughterhouse.

monitor.

(2) According to the guidelines of the World Organization for Animal Health "Terrestrial Animal Health Code" 1.6.7 The chapter provides for monitoring at the slaughterhouse side.

Because farmers will send their animals to the slaughterhouse, it is very easy to obtain all kinds of information.

## 2. Use of animal medicine

(1) Antibiotics for animals prescribed by the Bureau of Inspection and Quarantine are mainly divided into two categories. The first category is prescription drugs, which need to be

A prescription is issued for the treatment, and the owner can then purchase and use according to the prescription instructions; the second category is non-prescription medicines

The use of drugs shall comply with the regulations on the use of drug-containing feed additives, and the use of such drugs shall be legally registered

Limited to feed mills and self-made feed users. The part of drug-containing feed additives has been introduced in the Republic of China 89 Years began to delete, tired Plan cut 36 Kind of antibacterial agents that have to be added to feed 9 Kind, now this 9 All species are dedicated to animals.

(2) Currently, the Bureau of Inspection and Quarantine only approves 16 kinds of medicines for aquatic animals. All of these 16 medicines are prescription medicines.

Any non-prescription drugs or feed additives, however, the type of domestic aquatic animal breeding is more complicated, and each drug The target fish species are also different.

(3) The Bureau of Inspection and Quarantine has an animal drug technical review committee, which invites domestic experts and scholars in related fields to discuss Technical data will be reviewed. If there are new antibiotics to be used in poultry and livestock, the Food and Drug Administration will be invited to attend the review. Under the mechanism, the Bureau of Inspection and Quarantine and the Food and Drug Administration maintain a cooperative relationship.

(4) Taiwan since 2000 Year is deleted Avoparcin ( Ambasol, vancomycin Vancomycin Of similar drugs) as

It is found that the resistance of microorganisms isolated from animals to the drug is from 30-40% Down to Below 1% , Instead the National Institutes of Health implemented the Taiwan Microbial Resistance Monitoring Program ( TSAR) in, VRE Drug resistance The recent monitoring report shows that 2002 Microorganisms isolated from humans in Vancomycin Drug resistance is 0% , But to 2010 Has increased to 24.5% ; In addition, Denmark and Japan have similar results. The data of both countries show that the prohibition Avoparcin After the separation of livestock and poultry Vancomycin Although the resistant bacteria are reduced, they are isolated by humans Vancomycin Drug resistance Bacteria continues to rise. These results and the aforementioned Science Periodical literature shows that drug-resistant microorganisms Animals are not very relevant. If only unilaterally restricting the use of antimicrobials in animals, it is not easy to achieve the goal of reducing human resistance to bacteria.

### 3. Environmental impact

(1) During the implementation of the integrated epidemic prevention plan, the Bureau of Inspection and Quarantine found that environmental pathogens or environmental indicators

It is also a very important link. In the future, we hope to cooperate with the Ministry of Health and Welfare and the Environmental Protection Agency to establish a monitoring mechanism. Find out appropriate control strategies and mechanisms.

(2) Regional water pollution will cause changes in community bacterial species, and part of the water flow may come from farms or livestock farms.

It is recommended to take several fixed-point monitoring on farms or livestock farms to collect reference data.

### 4. Health insurance system

Taiwan has been promoting the antibiotic management plan for four or five years. When the antibiotic management plan was started in the medical center, It has indeed saved the medical center's antibiotic usage and expenses. If the money saved can be appropriately returned to the hospital and infection For physicians, anti-drug prevention and treatment will definitely be more helpful.

### ( Three) Biosafety and Biosecurity

Expert response JEE Suggest and JEE The opinions other than the suggestions are as follows:

- Response JEE Suggested part

1. Taiwan should continue to implement a controlled pathogen plan, including preservation units for combined dangerous pathogens and toxins, and improve training, Physical security and personnel surveillance (including non-experimental personnel approaching dangerous pathogens).

Expert opinions are as follows:

- (1) "Key Points for the Management of Controlled Pathogens by the Ministry of Health and Welfare" has been published in the Republic of China 106 year 7 month 10 Implementa

One and two both contain items, types, and total amount of controlled pathogens with high risk and general controlled pathogens. Order out tube

The list of regulatory pathogens helps to improve JEE The score in the assessment.

- (2) It is recommended that the Department of Disease Control set the qualification standards for laboratory operators, including laboratory host, laboratory personnel and equipment

Personnel etc.

- (3) Regarding the reliability of laboratory personnel, Taiwan has no more biodiversity than the United States ( biodiversity) Situation, so worry

IS Organization or Kaida organization problem. The most important thing in Taiwan is the quality of laboratory personnel, including technical loyalty in physiological aspects.

Sincerity and psychological soundness, to avoid incorrect operation and application by personnel with inconsistent quality when using these pathogens.

- (4) The logistics and transportation of regulated pathogens should have relevant regulations and supporting measures. Part of the regulations can refer to the "Ionizing Radiation P

When transporting pathogens, specify what kind of protection measures should be taken; supporting measures refer to whether to adopt real-time monitoring systems and set

Emergency response mechanism.

- (5) Take the laboratory of National Taiwan University as an example. There are three defense systems, each of which is monitored by video equipment. Personnel Management

In the system, the keys are kept separately and signed for confirmation; if the laboratory personnel go abroad, the objects in the laboratory

The goods will be re-counted to confirm whether the goods are missing. Shuanghe Hospital enters the contact list of laboratory managers

To avoid the situation where the responsible person cannot be found due to the staff's vacation.

2. Consolidate dangerous pathogens into at least quantity and tightly controlled laboratories to reduce the risk of related work and reduce the preservation of these diseases

The original required resources.

Expert opinions are as follows:

- (1) Taiwan currently does not have a central database for specific controlled pathogens, and a similar national biological database can be considered

(Biobank) The practice is to minimize management and stipulate that general laboratories cannot store specific controlled pathogens.

It can be stored in the state P4 Above the laboratory.

- (2) At present, the government does not have regulations on special health check items for relevant personnel in biological laboratories. If there are, the enforcement unit is very g

Allow frontline personnel to enjoy special health checks.

- JEE Expert opinions other than suggestions

1. Laboratory construction

- (1) Taiwan's current regulations on laboratory construction are not very clear, so that first-line laboratory operators have to plan and build

To set up a biosafety laboratory, you must read the building regulations in detail, and communicate with the manufacturer during the construction process, suggesting disease

The Department of Manufacture may conduct an audit at the stage of the design blueprint, and then construct it after passing it.

- (2) The main points of my country's current biosafety laboratory specifications are not fully reconciled with the building regulations. For example, the

Fire prevention and facilities are not suitable for high-protection laboratories. Can we consider adding special regulations in the building codes?

To avoid legal conflicts.

(3) A container house type laboratory is more suitable for continental countries. Due to the small size of Taiwan's land, transmitting specimens is

The laboratory is more efficient.

## 2. Personnel certification

(1) The qualifications of a laboratory staff first emphasize academic qualifications and experience; the former must be expertise in microbiology, immunity, and public health;

The latter must have many years of laboratory operation experience.

(2) Currently, the CDC has not yet established a biosafety professional verification mechanism, such as biosafety officers.

The Security Association and the Taiwan Testing and Testing Association came to handle the training, but their courses and certification standards have not been recognized

can. The National Certification Foundation currently provides "personnel verification agency certification services"Recognized in accordance with international standards

To ensure that the organization's service quality and capabilities meet the standards, and that the qualifications and capabilities of biosafety professionals

A certain level.

## 3. Regulation of Controlled Pathogens

(1) There are two basic principles for the establishment of controlled pathogens. The first is to comply with international standards, and the second is that incidents have occurred

Old pathogens, such as avian flu or new A Type flu.

(2) There is only one botulinum toxin ( Botulinumneurotoxin) belong RG2 ,

Everything else RG3 Above; as for RG3 , RG4 The operating specifications for pathogens have been set quite clearly in the "Management

Measures for Infectious Biological Materials", and there should be no major problems as long as they are followed.



( Four) Strategy road map

The strategic roadmap of this project contains three themes: zoonotic diseases, antibiotic resistance, biosafety and biosafety

The format of the strategy roadmap is in accordance with GHSA Example of strategic road map (Figure 15 Vietnam case), the content of strategic road map planning

in accordance with JEE The appraisal report, expert consultation meeting and related literature verification are completed. Among them, relevant domestic authorities and

The decision of the international partner is as follows: The domestic authority and responsibility unit is based on the administrative unit's organization and reference JEE When evaluating

The co-organizer of the company will formulate the content of the corresponding strategy; the international partner is based on the past experience of the CDC and international partner

Refer to the country in JEE Appraisal of the strengths in the report, as well as the international

The understanding of partners, etc., to be formulated. For example, Thailand's biosafety and biosecurity JEE The assessment score is higher than that of Taiwan, and

It is also one of the leading countries in the development of national laboratory energy and epidemic prevention manpower development action plans. At the same time, Thailand's disease

Deputy Director of the Department of Disease Control Tanarak Plipat He has visited and exchanged in Taiwan many times and has established good

interaction. Therefore, under the theme of biosafety and biosafety, the strategic plan recommends that the Thai CDC be the international partner. In addition, non-governmental organization

Generation Also assisted our country to participate GHSA Meeting in Uganda, this project also invites Next Generation principal

Dr. Jamechia Hoyle With vice chairman Dr. Taylor Winkiemba Come to Taiwan to participate in international forums and roundtable discussions and consultation meetings, and

Consult it on the strategic planning of the three themes, and suggest the strategic road map for the three themes Next Generation As an international partner.

The following is a detailed description of the key points of each theme's strategic planning.

GHSA Goal	GHSA Objective	GHSA 5-Year Target	
Prevent Avoidable Epidemics	Preventing the emergence and spread of antimicrobial drug resistant organisms and emerging zoonotic diseases and strengthening international regulatory frameworks governing food safety.	Adopted measured behaviors, policies and/or practices that minimize the spillover of zoonotic diseases from lower animals into human populations.	
5-Year Goal: Strengthen and integrate prevention, surveillance, laboratory, and response capacities to minimize the spillover and transmission of zoonotic diseases between animal (domestic and wild) and human populations.			
	Key Milestones	Responsible Vietnam Government Body	International Partners
Year 1	<ul style="list-style-type: none"><li>Zoonotic disease threats for Vietnam prioritized (human and animal)</li><li>Zoonotic Disease Action Package (ZDAP) international conference convened and Annual Plan developed</li><li>National multi-sectoral "One Health" coordination mechanism established and functioning</li><li>Updated the Integrated National Operational Program on AI, Pandemic Preparedness and emerging Infectious Diseases</li></ul>	MARD MOH	USAID CDC DoD CTR/CBEP FAO WHO USAID/WCS OIE UNDP USAID/P&R
Year 2	<ul style="list-style-type: none"><li>Wildlife farming demographics and risks characterized</li><li>Strengthened technical and biosafety capacity for animal health and human health laboratories to conduct diagnostic investigation of zoonotic diseases</li><li>Strengthened countries' commitment for cross-border epizone coordination on zoonotic diseases</li></ul>	MARD MOH	USAID CDC DoD CTR/CBEP FAO USAID/WCS WHO
Year 3	<ul style="list-style-type: none"><li>Surveillance gaps for wildlife-livestock-human interface identified</li><li>National preparedness and response plan updated for outbreaks of zoonotic disease. Cross-sector information sharing mechanisms strengthened.</li></ul>	MARD MOH	CDC DoD CTR/CBEP USDA USAID/P&R FAO USAID/WCS OIE
Year 4	<ul style="list-style-type: none"><li>Guidelines developed for safe practices related to wildlife handling and farm management and biosecurity</li><li>Risk assessment tools and risk communication plan developed</li></ul>	MARD MOH	USAID CDC DoD CTR/CBEP FAO WHO
Year 5	<ul style="list-style-type: none"><li>Cross-sector teams able to investigate and respond effectively and timely to outbreaks of zoonotic diseases, especially for veterinarians.</li><li>Policies established that enable systematic cross-sector collaboration and coordination.</li></ul>	MARD MOH	USAID CDC DoD CTR/CBEP WHO FAO USAID/P&R

Figure 18. GHSA Example of strategic road map (Vietnam strategic road map)

## 1. Zoonotic diseases

The strategic road map planning of this topic is based on first JEE. The results of the evaluation include "areas that need to be strengthened" and "recommendations "Priority actions", as shown in Table 16, develop a strategic direction, and then invite experts to consult and discuss the strategic direction.

Table 16. JEE Evaluation results

人畜共通傳染病			
項目	P.4.1- 已具備重要人畜共通傳染病病原體監測系統: 5 Minute	獸醫或動物衛生人員資源: 5 Minute	P.4.3- 已建立對已知及潛在人畜共通傳染病的有效應變機制: 5 Minute
需要強化的領域	1. The Council of Agriculture and the CDC should have better Coordination and integration. At this stage these two Task sex only Flow, and the monitoring system is not directly Link, but both parties should have more frequent Information sharing. 2. At present, Taiwan does not have a unified epidemic Prevention Policy. However, the Taiwanese government has Plan this topic and Expected at 2017 Implementation began in the	have better Trained public health personnel Very rarely. 2. Currently, the Council of Agriculture and Health Check training class( Field Epidemiology Training Program, referred to FETP) There is no personnel exchange, and FETP Personnel did not accept Training of the committee Practice.	no
建議的優先行動	1. Formulating and implementing an integrated epidemic prevention policy can help clarify the roles of the central, regional and local governments. Further promote the integration of animal and human public health preparation, monitoring and response. 2. Establish a seamless connection between human health and monitoring systems so that the Disease Management Agency and the Council of Agriculture can share human and animal health information. 3. Provide additional training for personnel of local and regional agricultural agencies, and provide additional training for veterinarians, animal health personnel, Epidemiologists and public health agencies offer integrated training courses for epidemic prevention.		

(1) Regarding the "recommended priority actions" in the evaluation form, after discussion at the expert meeting, the comprehensive expert suggestions have the following points:

針對衛生的建議：

- 針對農衛雙方共同關注的疾病進行整合

According to the five types of statutory infectious diseases stipulated in the "Law on Prevention and Control of Infectious Diseases" of the Ministry of Health

It is recommended that Wei Fang can start cooperation on the diseases of the A, B, C, and C three types of animal infectious diseases, including: newly emerging poultry Influenza, tuberculosis, Japanese encephalitis. The proposed mechanism for future cooperation between the agricultural and health parties can start from the consideration of

- ~~進行農衛雙方實務體驗機制~~ for both agriculture and health

in JEE Assess the sub-projects in the project of zoonotic diseases P.4.1 "Fields that need to be strengthened" mentioned that "The Council of Agriculture and the CDC should have better coordination and integration. At this stage, these two agencies only conduct ~~Suggest Wei Fang~~ changes."

The industry personnel go to the farmer for communication and practical experience to familiarize themselves with each other's operating systems and operating methods.

- ~~增進農衛雙方資訊交流機制~~ between the agricultural and health parties

Currently, the Bureau of Inspection and Quarantine and the Department of Disease Control and Prevention have their own monitoring systems, but the systems of both The sharing and exchange of information can only be carried out through the contact window of both parties. It is recommended that the Wei side connect the system directly,

Let information be exchanged more directly, quickly and transparently. If you can't build a direct link mechanism immediately, you can refer to

The model built by the CDC's epidemic prevention cloud selects the exchangeable fields in the database, through XML Format to exchange.

In addition, due to the various types of animal infectious diseases, it may not be possible without the assistance of veterinary professionals.

The information received should be sorted effectively. It is recommended that the CDC consider increasing the recruitment of veterinary personnel, so that it can be correct and

Quickly interpret the message sent from the farmer.

#### ~~針對農市的建議~~: Recommendations for Farmers:

- ~~強化農市人力資源~~ resources

##### A. Reduce the turnover rate of farmers

The Bureau of Inspection and Quarantine is the unit responsible for animal epidemic prevention, but due to the high gap between the business volume and the number The mobilization rate is too high to effectively pass on experience. Stabilizing the farmer's quarantine personnel is a key point.

##### B. Distinguish between animal epidemic prevention and animal protection

In order to carry out animal protection business, the local government put it into the responsibility of animal epidemic prevention unit, but the original animal epidemic pr However, the manpower for animal epidemic prevention was not increased due to the increase in business, and the manpower for animal epidemic prevention was relatively

Anti-epidemic function. The proposed solution is to set up a special unit for animal protection business and divide its business from epidemic prevention units.

Separate out.

##### C. Personnel training for epidemic prevention

Due to local autonomy and limited human and financial resources, it is difficult to implement certain policies from the central government to the local governments. Sugg The inspection bureau of the unit can increase the number of personnel and train them. After the training is completed, they can be assigned to local units to let the frontline pe

Members can fully understand the operating mechanism of the central epidemic prevention policy to achieve the goal of integrated epidemic prevention.

##### D. Hygiene Investigation Training Course ( FETP) Personnel training

Inspection Bureau in the Republic of China 97 Year and 98 The three-day epidemiology personnel training was conducted twice a year, but it could not be maintained for a long time. The training plans were scattered among various scientific and technological plans, causing training gaps. It is recommended to prevent

The integrated plan of the epidemic is based on the personnel training model of the Disease Control Agency for training. The prevention, detection and response capabilities are a complete development mechanism.

E. Build an epidemic response manpower

Given that the quality of personnel requires long-term training and retention, once the epidemic breaks out, they will be

It is recommended that the "sea leopards" that can be mobilized during the emergency can be recruited to meet the needs of manpower deployment.

- **加強農戶通報機制** Mechanism for farmers

Although the current epidemic notification system can use or share the information it collects, the source of the information

Still rely on farmers' notifications. If the farmers on the front line do not report because they are worried about the economic loss caused by the notification,

Therefore, the back-end system will not be able to obtain necessary information about the epidemic in time, which will cause loopholes in monitoring. Current inspection

Although the bureau has taken many measures to collect data, it is still not proactive enough to achieve comprehensive monitoring. In addition,

There is an information gap between the existence of central and local units. If the local epidemic situation is not reported to you, wait until

Before the central authorities have information on the epidemic, the time gap may lead to the expansion of the epidemic. Therefore, how to strengthen farmers' notification

The willingness of the law, the provisions of the law, can consider the inclusion of incentive clauses similar to whistle blowing, and cooperate with the compensation mechanism

Report rate.

- **善用獸醫學校的資源** the veterinary school

Since the manpower of government units is limited by the establishment, when an epidemic breaks out, it often requires a lot of manpower to invest in the epidemic

Handling investigations, inspections, etc. However, the only national laboratory of the farmer is the Animal Health Laboratory.

The increased workload becomes insufficient manpower. It is recommended that the school laboratory can be combined as a "reference laboratory" (reference

laboratory) To share and deal with the stress, and to call in students with medical or veterinary background in medical school or veterinary school,

It is possible to form a line of defense without retraining and speed up the handling of the epidemic. It is understood that the Bureau of Inspection and Quarantine currently

"Technical plan" means signing a contract with the Veterinary University every year to reserve the amount of laboratory test energy and laboratory related resources

The qualification requirements are set out in the "Regulations on Prevention and Control of Animal Infectious Diseases" 12-2 Article. If you have the qualification of a veterinarian

**Act 15 Article: "Veterinarians must comply with the local municipality or the**

The duty of the county (city) competent authority to command". If an epidemic breaks out, the "Animal and Plant Disease Disasters" stipulated in the "Disaster Prevention and

As shown in Section 5 of the Business Plan for Disaster Prevention and Rescue: "The Council of Agriculture and local governments at all levels should master the prevention and

Relevant human resources, if necessary, handle recruitment matters." "Animal and Plant Epidemic Disaster Emergency of the Agriculture Committee of the Executive Yuan

The sixth item of the "Main Points of Operation of the Response Team" also contains one of the tasks of the Bureau of Inspection and Quarantine: "Coordination of animal and

Recruitment support for police, military and environmental protection personnel."

- **與衛方的交流合作整合** and cooperation integration with Weifang

In response to the aforementioned "disease of common concern for both agricultural and health parties", "practical experience mechanism for both agricultural and health

Information Exchange Mechanism", it is suggested that communication, cooperation and integration with the health side can be strengthened to achieve the goal of integrated

(2) Comprehensive plan JEE Evaluation report, expert advice, strategic planning for infectious diseases common to humans and animals, except for the above experts

In addition to the suggestions, it is drafted as follows with literature references:

- **制定防疫一體政策**  
Formulate an integrated epidemic prevention policy

This expert meeting did not provide advice on this topic. However, in the reference, Vietnam has an integrated strategy for epidemic prevention.

Planning" as the general guide, and a secretariat ( Secretariat Office of The Partnership onAvian and Human

Influenza) To coordinate cross-departmental cooperation [ 32] ; The United States has an "Epidemic Prevention Office" and "National Emerging and Human and Animal

Department of Emerging Infectious Disease Prevention and Control, ~~Develop of the Cooperative Infection Disease System~~ with the concept of integrated epidemic prevention[ 4] , Vietnam

Each country has set up a dedicated unit for the integrated epidemic prevention policy. This plan recommends that the government refer to the US and Vietnam

An inter-departmental report that integrates epidemic prevention is set up under the government. Usually, it is mainly connected and coordinated. When an infectious disease s

Transform into a joint command center to help clarify and integrate the functional roles of the central, regional and local governments, division and cooperation,

Complete animal and human disease and public health monitoring, maintenance and response systems.

- **增進農衛雙方資訊交流機制**  
Improve the information exchange mechanism between the agricultural and health parties

A search in the literature shows that the United States has liaison officers between federal agencies ( liaison officers) , Through regular conference calls

Share formal or informal monitoring data and outbreak reports. Monitoring reports from different units will be posted on the website

Line sharing[ 4] .

- **開設防疫一體訓練課程**  
Establish an integrated training course for epidemic prevention

Indonesia in 2012 Established the "Indonesia Epidemic Prevention University Network" ( The Indonesia One Health University

Network, INDOHUN) , Combine the rights and interests of outstanding scholars, scientists, communities and professionals to establish a

Collaboration platform, and 2016 year 2 Beginning of an integrated training course on epidemic prevention ( One Health Training) , The content

includes three days of classroom teaching and field trips [ 34] . Vietnam offers three training courses:( 1) Two years FETP course,( 2)

"Applied Veterinary Epidemiology Training Course"; ( 3) Vietnam Epidemic Prevention University Network ( The Viet Nam One Health

University Network Project, VOHUN) , A three-month short-term course [ 48] .

- **針對農衛雙方共同關注的疾病進行監測資訊之整合**  
Integrate information on infectious diseases with mutual concern between agriculture and health care

The United Kingdom has established a "Human and Animal Infectious Diseases and Risk Monitoring Team" ( Human animal infections and risk

surveillance group, HAIRS) , Animal and public health departments can share all routine monitoring data, and call for monthly

Hold regular meetings or project meetings to discuss major events in the monitoring report. Pathogens currently shared by both parties in routine information

The categories are: Escherichia coli, Salmonella, Rabies, Brucella, Mycobacterium bovis, and common infectious diseases in humans and animals.

When an outbreak occurs, some members of both parties will cooperate to deal with the outbreak[ 46] . The U.S. Department of Disease Administration and the Department of

There is a list of cooperation on infectious diseases[ 4] . This project can also be included in the design of an information exchange mechanism between the agricultural and he

- **與獸醫學校合作**  
Cooperate with veterinary school

The United States has a national network of animal health laboratories ( National Animal Health Laboratory Network, NAHLN) ,by 62 State

with university related ( university-associated) Is composed of veterinary diagnostic laboratories. Through this network, important data can be sent to

the National Animal Health Monitoring System ( National Animal Health Surveillance

System, NAHSS) in[ 4] . The Department of Public Health of the United Kingdom provides job opportunities to veterinary students in school, so that veterinary related Of students can also play in the public health department[ 49] .

- ~~改善農方通報機制~~ Improve notification mechanism for farmers

The United States has integrated the existing national animal health notification system for the monitoring and notification of animal diseases ( National Animal Health Reporting System, NAHRS) With the National Animal Health Monitoring System ( National Animal Health Monitoring System) , Incorporate existing animal health monitoring plans and activities into the comprehensive national animal health monitoring system System in [ 4] .

(3) The strategic road map drawn up according to the strategic plan is shown in Table 17. The strategic action suggestions under the major milestones can be

The competent authority shall make appropriate adjustments in consideration of the government's resource capacity and governance objectives:

Table XVII. Path Diagram of the Strategy for Human-Animal Infectious Diseases

GHSA aim目標	GHSA purpose目的	GHSA Five-year target五年目標
Prevent the occurrence of infectious diseases	Prevention of drug-resistant microorganisms and emerging human-to-human transmission	Adopt prudent responses, policies and/or practices
	The emergence and spread of infectious diseases, and the strengthening of relevant food laws to reduce the spread of zoonotic diseases	
	Safe international regulatory framework.	Possibility of contaminating humans.
<p>Five-year goal: Strengthen and integrate prevention, surveillance, laboratory and response capabilities to minimize the reduction of animals (livestock, poultry and wild animals).</p> <p>The spread and spread of infectious diseases common to humans and animals between humans and humans.</p>		
時程Schedule	主要里程碑Major milestones	台灣權責單位和responsibilities國際夥伴International partners
the first year	1. Formulate an integrated epidemic prevention policy 2. Plan integrated epidemic prevention training ( One health training) Course, contains Classrooms, internships and online courses 3. Review the farmer's disease notification mechanism 4. Review the information exchange mechanism between the agricultural and health parties (including the monitoring system)	US Department of Disease Control Disease Control Agency World Animal Health Organization Inspection Bureau Department of Health of Quang Ninh Province, Vietnam Next Generation
the second year	1. Establishing a routine report for epidemic prevention and joint setting up of commanders heart 2. Review the cooperation plan with the veterinary school 3. Jointly implement the supervision and information exchange of diseases that can be cooperated by both agricultural and health parties Change (bird flu) 4. Reconcile planning farmers' disease notification innovation mechanism	US Department of Disease Control Disease Control Agency World Animal Health Organization Inspection Bureau Department of Health of Quang Ninh Province, Vietnam Next Generation
The third year	1. Implement an integrated training course for epidemic prevention 2. Harmonize the information exchange mechanism between agriculture and health 3. Jointly implement the supervision and information exchange of diseases that can be cooperated by both agricultural and health parties Change ( TB ) 4. Implement and improve farmers' disease notification mechanisms	US Department of Disease Control Disease Control Agency World Animal Health Organization Inspection Bureau Department of Health of Quang Ninh Province, Vietnam Next Generation
fourth year	1. Jointly implement the supervision and information exchange of diseases that can be cooperated by both agricultural and health parties Swap (rabies) 2. Complete the information exchange mechanism between the agricultural and health parties 3. Complete linking of resources of veterinary school	US Department of Disease Control Disease Control Agency World Animal Health Organization Inspection Bureau Department of Health of Quang Ninh Province, Vietnam Next Generation
fifth year	1. Jointly implement the disease cooperation model between agriculture and health (other diseases) 2. Inventory and strengthen the implementation results of each year's milestone projects	US Department of Disease Control Disease Control Agency World Animal Health Organization Inspection Bureau Department of Health of Quang Ninh Province, Vietnam Next Generation



## 2. Antibiotic resistance

The strategic road map planning of this topic is based on first JEE The results of the evaluation include "areas that need to be strengthened" and "recommendations Priority actions", as shown in Table 18.

Table 18. JEE Evaluation results

Antibiotic resistance				
Item	P.3.1- Antibiotic resistance (AMR) Therapeutic value Measurement: 5 Minute	P.3.2- AMR pathogen Monitoring of infections caused by pathogens Measurement: 5 Minute	P.3.3- Medical care related infections Prevention and control plan Measurement: 4 Minute	P.3.4- Antibiotic management Measurement: 4 Minute
Need to strengthen the leadership	Human health and agriculture Department should be in the laboratory The hierarchy goes further Coordination and integration, and Promotion of the CDC, Food and Drug Administration (Simplified (Called the Food and Drug Administration and the Agriculture Number of shared laboratories Data, bacterial strains and Susceptibility test knot fruit.	In animal's AMR Monitoring, FDA only Supervised in the slaughterhouse Control without agriculture Field, so I can only mention for AMR Mode one Administration and the Agriculture Not yet from food The supply chain goes back to To affected farms and Removed from animals Drug-resistant microorganisms.	no	1. Not all hospitals have enough Resources and funding can be notified AMR data. Provide regional doctors Additional resources and funds of the hospital, Will help improve AMR of Monitoring, notification and management. 2. Due to the use of antibiotics Each hospital decides, so the hospital There may be big differences between. If there is a national level AMR tube Management guidelines may be helpful.
Suggestions for the excellent ahead of the	<p>1. Taiwan should further establish a national antibiotic management. Although Taiwan has 2013 National Antibiotics However, evidence shows that there are still considerable differences in the use of antibiotics in various medical institutions. Consider the plan Painted in 2013 It has been promoted since 2000, and may not have reached the full impact. Effective data collection and analysis will It helps to review and adjust this plan in the future.</p> <p>2. Taiwan should improve food-borne pathogens and AMR Links between microbial monitoring mechanisms.</p> <p>3. Taiwan should consider expanding animal AMR Testing (before the animals are sent to the slaughterhouse) to ensure AMR can Go back to the farm.</p>			

(1) In response to the "recommended priority actions" in the assessment, after discussion at the expert meeting, the comprehensive experts suggested the following points:

- **連結跨單位對抗生素抗藥性的監測**

The Bureau of Inspection and Quarantine, the Department of Disease Control, and the Food and Drug Administration through the "integration and improvement of my c painting

Has established Salmonella PFGE Database, collected from human Salmonella

Strains isolated from food poisoning and Salmonella isolated from microorganisms on the surface of carcasses from the slaughterhouse.

When there is a food-borne disease outbreak, cross-comparison can be done directly through the database, which can clarify the food in time

Whether the poisoning case is related to the raw materials of animal products. For the part of antibiotic resistance, there is currently no cross-unit integration

Monitoring, the Bureau of Prevention and Inspection in the future will invite the CDC to carry out related plans.

- **建立跨單位對環境病原體的監測**

The use of antibiotics directly affects not only humans and animals, but the living environment is also indirectly affected by antibiotics.

influences. According to the results of the National Institutes of Health's monitoring of water bodies in the North, Central and South basins, it can be tested in river water bodies

Amphetamines, antibiotics and other substances. The use of antibiotics in the breeding process causes pollution of land

When the contaminated water enters the community, it will cause changes in community bacteria. How to monitor these environmental pathogens,

It can be combined with the Ministry of Health and Welfare, the Environmental Protection Agency, and relevant farmers to establish a monitoring model, and find appropriate

Governance strategy.

- **建立醫院抗生素管理計畫之獎金制度**

Taiwan has implemented an antibiotic management plan for four or five years. After the antibiotic management plan is implemented in the medical center,

It reduces the use of antibiotics and saves money. But for the first-line personnel involved in infection control,

There will be no financial rewards for implementing the antibiotic management plan. It is suggested that a bonus system can be established and the setting reached

Related indicators (such as the rate of nosocomial infection, the notification rate of legal infectious diseases, etc.), if reached, bonuses will be issued to the first-line infection co

Control relevant personnel, and expect to achieve the effect of substantial encouragement.

- **將醫療照護相關感染管理的模式推廣至社區**

The current antibiotic management plan can only be implemented in medical centers or large regional hospitals.

The measures are only used in hospitals, but from the current development trend of medical care in Taiwan, community medical care will become a focus. for

In response to the future development of community medical care, the concept of infection control in hospitals and related measures can be extended to the community

The level of medical care.

(2) Comprehensive plan JEE The evaluation report and expert recommendations are supplemented by literature references. The strategic plan for antibiotic resistance is as follows:

- **建立整合性抗生素抗藥性監測系統**

America on 1996 The National Antibiotic Resistance Surveillance System ( NARMS) , Integrating American Food and Drug

Data monitored by the Food Administration, the US Department of Disease Control and the US Department of Agriculture [ 4] . Canada has established "Canada Antibiotic

Drug Integration Monitoring System" ( CIPARS) Developed a central data warehouse ( central data repository) For standardization

In the laboratory and epidemiology antibiotic resistance data for analysis [ 36] .

- **建立跨單位對環境病原體監測系統**

environmental pathogens

British in 2013 Developed the "Britain Antibiotic Resistance Strategy 2013-2018 ", which stated a cooperation plan with the "United Kingdom Ministry of Environment, Food and Agriculture", and then 2015 The annual monitoring report lists common animal and human Antibiotic resistance data of key bacteria, detailed records of the use of human and animal antibiotics, and proposed improvements Recommendations of the National Monitoring Plan [ 39] .

- **建立醫院抗生素管理計畫獎勵制度**  
Establish hospital antibiotic management plans

The most serious basic problem of infection control in Japanese hospitals is the lack of hospital staff. Social medical insurance system Under certain circumstances, hospitals tend to allocate health care workers and infection control personnel to different fields, resulting in different incomes between the two. But in 2010 year 4 New measures have been implemented since October. If the ratio of sensory nurses to sensory physicians stipulated by the Ministry of Health, Labour and Welfare is met, they will be issued on a per-patient basis. 12 US dollars as compensation. Through this method, the larger The needs and feedback of the hospital. [ 40]

- **擴大醫療照護相關感染計畫與抗生素管理計畫至社區**  
Expand the healthcare-associated infection plan and antibiotic management plan to the community

Singapore on 2017 year 11 Released the "National Antibiotic Resistance Strategy Action Plan" , Its second core policy "Future Priority Actions" in the strategy ( PriorityAreas for FurtherAction) One item is "Expand the scope of monitoring Build private hospitals and community through the first-line clinics to investigate the use of antibiotics and drug resistance in order to detect The severity of the antibiotic problem in the district [ 50] . U.S. Department of Health and Welfare ( Health and Human Services, HHS) in 2013 In the national action plan of 2015, a new chapter was added to prevent medical care-related infections in long-term care institutions [ 51] .

- **建立農場端抗生素抗藥性的監測系統**  
Establish farm antibiotic resistance monitoring system

During the expert meeting, the Bureau of Inspection and Quarantine stated that monitoring has been done in the mooring yard of the slaughterhouse. After receiving treatment and not yet ready to market, monitoring is of little significance. However, in the references, the Canadian "Canada Integrated Monitoring System for Antibiotic Resistance" ( Canadian Integrated Program for Antimicrobial Resistance Surveillance, CIPARS) Designed with farm monitoring components, including abattoirs and retail markets. In addition, according to the farm According to the specifications of the sentinel framework, questionnaires can be used to collect information on farm population, animal health and antimicrobial use. After collection, the stool samples are submitted to the laboratory for bacterial isolation and antimicrobial susceptibility testing [ 52] .

(3) The strategic roadmap drawn up according to the strategic plan is shown in Table 18. Among them, the strategic action suggestions under the major milestones, the supervisor The agency may make appropriate adjustments based on the amount of government resources and governance objectives:

Table 19. Path diagram of antibiotic resistance strategy

GHSA aim目標		GHSA purpose目的	GHSA Five-year goal五年標的	
Prevent the occurrence of infectious diseases		Prevention of antibiotic-resistant microorganisms Things and emerging people and animals The emergence of communicable diseases And spread and strengthen <b>Food safety</b> International regulatory framework	Develop an integrated and global action plan against antibiotic resistance, and cover Human, animal, agricultural, food and environmental aspects (ie integrated strategy for epidemic prevention), including: 1) Taiwan has a national comprehensive plan to combat antibiotic resistance 2) According to the whole International standards developed under the framework of the Global Action Plan, taking into account existing standards, str Domestic and international monitoring and laboratory capabilities 3) Improve the preservation of existing treatments And work together to support new antibiotics, alternative therapies, preventive measures and rapid The continued development of site-specific diagnosis, including preservation systems for new antibiotics.	
Five-year goal: to prevent and control the emergence and spread of antibiotic resistance through effective and rational use of antibiotics in humans and animals broadcast.				
時程Schedule	主要里程碑Major milestones		台灣權責單位Taiwan Competent Unit	國際夥伴International Partners
the first year	1. Assess the supervision of the Department of Disease Control, Bureau of Prevention and Inspection, Food and Drug Administration, and Environmental Protection Agency Architecture of the test system 2. Evaluation of the antibiotic management plan reward system 3. Evaluate the establishment of a monitoring system for antibiotic resistance on the farm		Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, National Institutes of Health	US Department of Disease Control Next Generation
the second year	1. Evaluation and planning The CDC, the Bureau of Prevention and Inspection, and the Environmental Protection Agency can cooperate Monitoring environmental pathogens and cooperation mechanisms 2. Plan an antibiotic management plan reward system 3. Planning to integrate the national system of antibiotic resistance monitoring		Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, National Institutes of Health	US Department of Disease Control Next Generation
The third year	1. Implement the antibiotic management plan reward system 2. Planning a cross-unit environmental pathogen monitoring system 3. Planning community medical care-related infection plans and antibiotic management Management mechanism		Department of Disease Control, Prevention and Inspection Bureau, Environmental Protection Department, Social Welfare Department, National Institutes of Health	US Department of Disease Control Next Generation
fourth year	1. Implementation of a farm-side antibiotic resistance monitoring system 2. Expansion of linking medical care-related infection plans with Plan to the community		Department of Disease Control, Prevention and Inspection Bureau, National Institutes of Health	US Department of Disease Control Next Generation
fifth year	1. Establish an integrated antibiotic resistance monitoring system 2. Establish a cross-unit environmental pathogen monitoring system 3. Establish community antibiotic management plan and antibiotic management plan SWD, Management mechanism		Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, National Institutes of Health	US Department of Disease Control Next Generation

### 3. Biosafety and Biosecurity

The strategic road map planning of this topic is based on first JEE The results of the assessment include "areas that need to be strengthened" and "recommended advantages Act first", as shown in Table 20.

Table 20 JEE Evaluation results

生物安全及生物保全		
項目	P.6.1- For humans, animals and agricultural facilities have government one system of biological safety and biosecurity system: 3 Minute	P.6.2- Training and performance of biosafety and biosecurity practice: 3 Minute
需要強化的領域	<p>1. Currently, Taiwan has not formulated a plan to control pathogens. however, The draft of the main points of the management of regulated pathogens has been completed and is expected to be implemented in the year 2016.</p> <p>2. Biological preservation policies and regulations are not yet complete. Except a few, other security provisions should be added, such as wealth investigation or a personnel reliability program to improve Taiwan's biological protection all.</p> <p>3. According to the target set by the CDC, the dangerous pathogen has not been completely integrated of physical preservation facilities.</p>	<p>1. There is currently no specific training for dangerous pathogens. And plan to implement dangerous pathogens in the next year.</p> <p>2. Increase the relevant experts and guidance of the high protection laboratory, and contribute to the implementation of biosafety and health of regulated pathogens.</p>
建議的優先行動	<p>1. Taiwan should continue to implement a controlled pathogen plan, including preservation units for combined dangerous pathogens and toxins, and improve training. Training, physical security and personnel surveillance (including non-experimental personnel close to dangerous pathogens).</p> <p>2. Consolidate dangerous pathogens to <u>small</u> And strictly controlled laboratories to reduce the risk of related work and reduce the preservation of the Resources needed by these pathogens. (Source: JEE (Chinese version of the assessment))</p>	

(1) In response to the "recommended priority actions" in the evaluation and discussion at the expert meeting, the comprehensive experts suggested the following points:

#### • 管制性病原訂定原則

The formulation of controlled pathogens can follow two basic principles: A. Comply with international norms, B. Happened in Taiwan

Therefore, the pathogen must include the pathogen with biological warfare risk. Current "Main Points for the Management of Controlled Pathogens of the Ministry of Health and

Already in the Republic of China 106 year 7 month 10 It will be implemented on the same day, and the attached tables 1 and 2 both contain the

items, types and total amount of control of high-risk controlled pathogens and general controlled pathogens. If from JEE From the point of view of evaluation, it is sufficient to sp

In order to improve the evaluation score.

#### • 集中保存管制性病原

For the storage of controlled pathogens, please refer to the National Biological Database ( Biobank) The concept of general laboratory cannot be guaranteed

The controlled pathogens are stored in the high protection laboratory of the central unit. In addition, pathogens are stored

In addition to ensuring the survival of pathogens, on the other hand, it is necessary to ensure the rigor of storage, extraction, and application processes. This one Home opinion, after investigation and JEE The focus of assessment enhancement " A laboratory that consolidates dangerous pathogens into a minimum quantity and is strictly In order to reduce the risk of related work and reduce the resources required to protect these pathogens" there is a slight discrepancy. Therefore, this plan will Amend this comment to " Conservation and minimization of controlled pathogens."

- ~~強化管制性病原之運送機制~~ Strengthening the transportation mechanism of controlled pathogens

In practice, the transportation of regulated pathogens is mostly handed over to private logistics companies, and there is no strict control. It is recommended to strengthen the real-time monitoring and accident response mechanism of the transportation process, or to build an exclusive logistics unit by yourself. Timely train relevant staff responsible for logistics. For the part of the regulations, please refer to the "Ionizing Radiation Protection Law". Regulations for the transportation of unsealed radioactive materials, such as the inspection tool transportation plan, which specifies vehicles, personnel, and monitoring measures. Wait, the report will be approved by the original report, and this model can be used as a reference for the transportation of controlled pathogens. In response to this recommendation In the evaluation report, with regard to strengthening the preservation of controlled pathogens, the recommended strengthening projects are aimed at biological preservation project Incomplete, in addition to access control, priority actions should be added to other security regulations, such as wealth investigation or personnel reliability Project to improve Taiwan's biological preservation. For this priority action, the CDC has 2017 year 11 month 5 "Guidelines for the Preservation of Controlled Pathogens and Toxin Laboratories and Preservation Sites" , The guidelines set out relevant regulations for the preservation of controlled pathogens Fixed, but 2017 year 9 month 1 There was no such guideline at the time when the Japanese expert meeting was held. Therefore, this plan slightly revised this expert's suggestion to " Strengthen the preservation mechanism of controlled pathogens."

- ~~建立實驗室人員訓練與認證機制~~ Establish training and certification mechanism for laboratory personnel

Qualification as a laboratory staff first emphasizes academic qualifications and experience; the former must be in microbiology, immunity, and public health Expertise; the latter must have many years of laboratory operation experience. If it is only a short-term personnel training, there will be insufficient intensity. question. However, the CDC has not yet established a verification mechanism for biosafety professionals, such as biosafety officers, so it is currently The training is handled by the Biosafety Association and the Taiwan Testing Association, but the courses and certification standards handled by them have not been affected. Recognized by the Administration. It is suggested that relevant standards can be established for personnel certification to ensure the qualifications and qualifications of biosafety There is a certain level of ability. According to this expert's opinion JEE The areas where the assessment report needs to be strengthened are " Not currently A training plan is specially formulated for dangerous pathogens, but the CDD has recognized the need for additional training and plans to Implement annual training and management of dangerous pathogens as part of the control plan for pathogens" . The CDC has 2017 year 10 month 30 The "Guidelines for the Competency Assessment of Staff Regulating Pathogens and Toxins" was issued on Japan, which includes relevant guidelines for personnel training, but there are no clear certification requirements, but 2017 year 9 month 1 There was no such guideline at the time when the Japanese expert meeting was held. Therefore, this plan retains this strategic plan.

- ~~建立實驗室建造指引~~ Establish laboratory construction guidelines

There are some differences between the current laboratory biosafety management regulations and the "Construction Law". For example, the "Construction Law" Fire prevention and facilities are not suitable for high protection laboratories. If so, it can be updated in the "Construction Law". The construction authorization requirements for laboratory construction can enhance the clarity of laboratory construction in terms of regulations. This expert recommends and

non- JEE The key points emphasized in the assessment report are not included in this strategic plan.

- ~~完善實驗室工作人員之防護~~ Improve the protection of laboratory staff

The health of front-line workers in biosafety laboratories is a link worthy of attention.

From a perspective, the current government 31 This special health hazard operation does not specifically target the labor of biological laboratory workers.

Physical and health examination items. Of course, it may be difficult to set out the examination items, but if it can be divided into stages or according to the future

Manipulate specific biological materials (e.g. TB) It is added one after another, and the management unit can apply for the labor insurance bureau for free

The inspection subsidy is to give them a guarantee.

- ~~增進人員可靠性~~ Increase personnel reliability

The spirit of regulatory pathogen control is to prevent unqualified personnel from using these pathogens, or performing incorrect operations,

Application; for example, due to overworked personnel, abnormal mental state, or unconventional mentality of revenge against the society, there may be

Present improper behavior. As for how to avoid unsuitable people to operate, it is necessary to evaluate the personnel, such as

Those who are nervous or have a phobia of secret rooms cannot let him execute. As for JEE Report "Leading

The part of the personnel reliability involved in the net worth survey in the "domain" is based on the perspective of the United States, as its national population group

Biodiversity ( biodiversity) , So that it will worry about the terrorist organization. For Taiwan, it should be interpreted as

Karma loyalty includes both physical and psychological aspects. Physiological aspect refers to technical loyalty (not to be exported), psychological

The aspect refers to the psychological health of laboratory personnel, who can do psychological training or psychological counseling to avoid emotional ups and downs.

Big abnormal reaction.

(2) Comprehensive plan JEE Evaluation report, expert suggestions supplemented by literature references, strategic planning for biosafety and biosecurity

as follows:

- ~~管制性病原之保存整併最小化~~ Minimize the maintenance of controlled pathogens

Canada to 2015 There are only two as of the year CL4 Class-level laboratories are operating the most dangerous pathogens and accept

annual inspections[ 44] . Although the agencies in the United States that have controlled pathogens must follow the "Federal Pathogen Control Program" ( Federal Select

Agent Program, FSAP) Registered, but there is no plan to merge pathogens. "Federal Expert Security Advisory

Inquiry group Federal Experts Security Advisory Panel, FESAP) Has now provided high

Protect the controlled pathogens in the laboratory to help find the appropriate storage, use and transfer of these controlled pathogens

Number of original bodies [ 4] .

- ~~強化管制性病原之保全機制~~ Strengthen the security mechanism of controlled pathogens

U.S. Department of Transportation is responsible for the transportation and preservation of U.S. Biosafety, and the relevant provisions are set out in Article

49 chapter 171-180 Article [ 4] . Canada applies three different regulations to the transportation of controlled pathogens according to different "Dangerous

"Dangerous Goods Transportation Law", "Dangerous Goods Transportation Ordinance" and "Dangerous Goods Ordinance" [ 45] .

- ~~建立統一的教育訓練與人員認證機制~~ Establish unified education, training and personnel certification mechanism

There are many organizations in the United States that provide professional training for biosafety and biosecurity staff, including

Security Association , "National Institutes of Health" , Sandia Laboratory, Frontline Personnel Foundation, Johns Hopkins University

But there is still no single mechanism to ensure and supervise the competence and appropriate training of all laboratory staff [ 4] .

Singapore provides a list of certification bodies on the official website, and is organized by the "Asia Pacific Biosafety Association" ( Asia-Pacific Biosafety Association) As a provider of official education and training [ 43] .

- **完善實驗室工作人員之防護**  
Improve the protection of laboratory staff

The United States follows the "Biosafety Regulations for Microbiological and Biomedical Laboratories" The laboratories's occupational medical services must meet U.S. Occupational Safety and Health Administration ( Occupational Safety and Health Administration, OSHA) Specifications and related Laws, and after assessing the risks, formulate medical assistance services that meet the needs of the unit [ 4] .

- **增進人員可靠性**  
Increase personnel reliability

The FBI will conduct a risk assessment of persons exposed to controlled pathogens to confirm whether they are eligible for possession or Qualifications for transporting controlled pathogens[ 4] .

(3) The strategic roadmap drawn up according to the strategic plan is shown in Table 20, in which the strategic recommendations under the major milestones are suggested

The government will make adjustments based on resources, energy and governance objectives:



Table 21. Path diagram of biosafety and biosecurity strategy

GHSA aim目標	GHSA purpose目的	GHSA Five-year goal五年目標	
Prevent infectious diseases occur	Promote national biosecurity  And biological security system	Has a government-integrated national biosafety and biosecurity system to ensure danger  Pathogens are identified, held and preserved in accordance with the best practices in the minimum unit facilities  And monitoring; promote biological risk management training and education, and promote shared responsibility  Culture, reduce dual-use risks, control the proliferation of biological pathogens and deliberate use of threats  <b>Threats, to ensure the safe transfer of biological pathogens;</b>  Comprehensive and biological preservation laws, laboratory permits and pathogen control measures.	
Five-year goal: Strengthen the national biosafety and biosecurity system to ensure the identification, possession and transfer of regulated pathogens, and root  According to the best measures to protect and monitor controlled pathogens in the minimum number of facilities.			
時程Timeline	主要里程碑Major milestones	台灣權責單位Taiwan authorities	國際夥伴International partners
the first year	1. Complete the preservation and minimization of controlled pathogens  2. Plan a unified education training and personnel certification mechanism  3. Evaluation and planning to improve the protection of laboratory staff	Disease Control Agency  Animal Health Laboratory  Ministry of Defense	US Department of Disease Control  Thai Disease Control Agency  Singapore Department of Disease Control  Next Generation
the second year	1. Establish a unified education training and personnel certification mechanism  2. Implement and improve the protection of laboratory staff	Disease Control Agency  Animal Health Laboratory  Ministry of Defense	US Department of Disease Control  Thai Disease Control Agency  Singapore Department of Disease Control  Next Generation
The third year	1. Evaluate and strengthen the preservation mechanism of controlled pathogens  2. Implement a unified education training and personnel certification mechanism  3. Evaluation increases personnel reliability	Disease Control Agency  Animal Health Laboratory  Ministry of Defense	US Department of Disease Control  Thai Disease Control Agency  Singapore Department of Disease Control  Next Generation
fourth year	1. Planning to strengthen the preservation mechanism of controlled pathogens  2. Review and review the unified education training and personnel certification mechanism  3. Plan to increase personnel reliability	Disease Control Agency  Animal Health Laboratory  Ministry of Defense	US Department of Disease Control  Thai Disease Control Agency  Singapore Department of Disease Control  Next Generation
fifth year	1. Implementation of a preservation mechanism to strengthen control of pathogens  2. Implementation improves personnel reliability	Disease Control Agency  Animal Health Laboratory  Ministry of Defense	US Department of Disease Control  Thai Disease Control Agency  Singapore Department of Disease Control  Next Generation

(5) summary

This sub-work is aimed at the three themes of zoonotic infectious diseases, antibiotic resistance, biosafety and biological preservation.

Three domestic expert consultation meetings on strategic planning, and a roundtable discussion and consultation meeting

Academic Research Expert Program 51 People, combining the evaluation results and suggestions of the above three themes, and supporting the corresponding literature data, and ba

GHSA The published information on the strategic roadmaps of various countries and the completion of my country's strategic roadmaps on these three themes are as follows,

As for the milestones in the implementation of the five-year strategy, the CDC still needs to make appropriate adjustments based on its governance objectives and resource allocation;

Consulting meetings and 3 The round table discussion meeting is shown in Appendix III.

# Global Health Security Program

## Strategy map

Taiwan

11/15/2017

## Zoonotic diseases 人畜共通傳染病

GHSA aim目標		GHSA purpose目的	GHSA Five-year goal五年目標	
Prevent the occurrence of infectious diseases		Prevent the emergence and spread of drug-resistant microorganisms and emerging zoonotic diseases, and strengthen the international regulatory framework for food safety.	Adopt prudent responses, policies and/or practices to then Reduce the risk of animal-to-human infectious diseases  Capability.	
Five-year goal: to strengthen and integrate prevention, surveillance, laboratory and response capabilities to minimize the spread and spread of zoonotic diseases between animals (livestock and wild animals) and humans.				
時程Schedule	主要里程碑Major milestones		台灣權責單位Taiwan responsible unit	國際夥伴International partners
the first year	<ul style="list-style-type: none"><li>Formulate an integrated epidemic prevention policy</li><li>Plan integrated epidemic prevention training ( One health training) Courses, including classrooms, internships and online courses</li><li>Review the farmer's disease notification mechanism</li><li>Review the information exchange mechanism between the agricultural and health parties (including the monitoring system)</li></ul>		Disease Control Agency Inspection Bureau	US Department of Disease Control World Animal Health Organization Department of Health of Quang Ninh Province, Vietnam Next Generation
the second year	<ul style="list-style-type: none"><li>Establish a routine report for epidemic prevention and joint establishment of a command center</li><li>Review the cooperation plan with the veterinary school</li><li>Joint implementation of the supervision and information exchange of diseases that can be co-operated by both agricultural and health parties (rabies)</li><li>Reconcile planning farmers' disease notification innovation mechanism</li></ul>		Disease Control Agency Inspection Bureau	US Department of Disease Control World Animal Health Organization Department of Health of Quang Ninh Province, Vietnam Next Generation
The third year	<ul style="list-style-type: none"><li>Implement an integrated training course for epidemic prevention</li><li>Harmonize the information exchange mechanism between agriculture and health</li><li>Joint implementation of the supervision and information exchange of diseases that can be co-operated by both the agricultural and health parties (rabies)</li><li>Implement and improve farmers' disease notification mechanisms</li></ul>		Disease Control Agency Inspection Bureau	US Department of Disease Control World Animal Health Organization Department of Health of Quang Ninh Province, Vietnam Next Generation
fourth year	<ul style="list-style-type: none"><li>Jointly implement the supervision and information exchange of diseases that can be co-operated by both agricultural and health parties (rabies)</li><li>Complete the information exchange mechanism between the agricultural and health parties</li><li>Complete linking of resources of veterinary school</li></ul>		Disease Control Agency Inspection Bureau	US Department of Disease Control World Animal Health Organization Department of Health of Quang Ninh Province, Vietnam Next Generation
fifth year	<ul style="list-style-type: none"><li>Jointly implement the disease cooperation model between agriculture and health (other diseases)</li><li>Inventory and strengthen the implementation results of each year's milestone projects</li></ul>		Disease Control Agency Inspection Bureau	US Department of Disease Control World Animal Health Organization Department of Health of Quang Ninh Province, Vietnam Next Generation

# Antibiotic Resistance

GHSA aim目標	GHSA purpose目的	GHSA Five-year goal五年目標	
Prevent the occurrence and spread of infectious diseases, and strengthen the international regulatory framework for food safety	Prevent the emergence of drug-resistant microorganisms and emerging zoonotic diseases frame.	Develop an integrated and global action plan to combat antibiotic resistance, and cover human, animal and the aspects of food, agriculture, food and environment (ie integrated strategy for epidemic prevention), including: 1) Taiwan has a national Comprehensive plan to combat antibiotic resistance 2) According to the international Standards, and consider existing standards, strengthen domestic and international monitoring and laboratory capabilities 3) Improve Have a therapy preservation mechanism and work together to support new antibiotics, alternative therapies, and preventive measures And the continuous development of rapid spot diagnosis, including preservation systems for new antibiotics.	
Five-year goal: to prevent and control the emergence and spread of antibiotic resistance through effective and rational use of antibiotics in humans and animals.			
時程Schedule	主要里程碑Major milestones	台灣權責單位Taiwan authorities	國際夥伴International partners
the first year	<ul style="list-style-type: none"><li>Evaluate the structure of the monitoring system of the CDC, the Bureau of Prevention and Inspection, the Food and Drug Administration</li><li>Evaluation of the antibiotic management plan reward system</li><li>Evaluate the establishment of a monitoring system for antibiotic resistance on the farm</li></ul>	Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, National Institutes of Health	US Department of Disease Control, Prevention and Inspection Bureau, Next Generation
the second year	<ul style="list-style-type: none"><li>Evaluate the environmental pathogens and cooperation that can be monitored by the three parties of the CDC, the Bureau of Prevention and Inspection and the Environmental Protection Agency</li><li>Plan an antibiotic management plan reward system</li><li>Planning to integrate the national system of antibiotic resistance monitoring</li></ul>	Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, National Institutes of Health	US Department of Disease Control, Prevention and Inspection Bureau, Next Generation
The third year	<ul style="list-style-type: none"><li>Implement the antibiotic management plan reward system</li><li>Planning a cross-unit environmental pathogen monitoring system</li><li>Planning the management mechanism of community medical care-related infection plans and antibiotic management plans</li></ul>	Department of Disease Control, Prevention and Inspection Bureau, Environmental Protection Department, Social Welfare Department, National Institutes of Health	US Department of Disease Control, Prevention and Inspection Bureau, Next Generation
fourth year	<ul style="list-style-type: none"><li>Implementation of a farm-side antibiotic resistance monitoring system</li><li>Expanding the link between healthcare-related infection plans and antibiotic management plans to the community</li></ul>	Department of Disease Control, Prevention and Inspection Bureau, Social Welfare Administration, National Institutes of Health	US Department of Disease Control, Prevention and Inspection Bureau, Next Generation
fifth year	<ul style="list-style-type: none"><li>Establish an integrated antibiotic resistance monitoring system</li><li>Establish a cross-unit environmental pathogen monitoring system</li><li>Establish a management mechanism for the community antibiotic management plan and antibiotic management plan</li></ul>	Department of Disease Control, Prevention and Inspection Bureau, Food and Drug Administration, Environmental Protection Agency, Social Welfare Administration, National Institutes of Health	US Department of Disease Control, Prevention and Inspection Bureau, Next Generation

## Biosafety and Biosecurity 生物安全與生物保全

GHSA aim目標		GHSA purpose目的	GHSA Five-year goal五年目標	
Prevent the occurrence of infectious diseases		Prevent the development of national biosafety and biological preservation systems, promote a culture of shared responsibility, reduce dual-use risks, control the proliferation of biological	Has a government-integrated national biosafety and biosecurity system to ensure that dangerous pathogens are in the least unit Identify, hold, preserve and monitor the facilities in accordance with best practices; promote biological risk management training and teaching Use threats to ensure the safe transfer of biological pathogens; already have appropriate national exclusive biosafety and biosecurity Laws, laboratory permits and pathogen control measures.	
Five-year goal: to strengthen the national biosafety and biosecurity system to ensure the identification, possession and transfer of regulated pathogens, and to protect and monitor regulated pathogens in the least number of facilities according to the best measures.				
時程Schedule	主要里程碑Major milestones		台灣權責單位Taiwan authorities	國際夥伴International partners
the first year	<ul style="list-style-type: none"><li>Complete preservation and minimization of controlled pathogens</li><li>Plan a unified education training and personnel certification mechanism</li><li>Evaluation and planning to improve the protection of laboratory staff</li></ul>		Disease Control Agency Animal Health Laboratory Ministry of Defense	US Department of Disease Control, Thailand's Department of Disease Control Singapore Department of Disease Control Next Generation
the second year	<ul style="list-style-type: none"><li>Establish a unified education training and personnel certification mechanism</li><li>Implement and improve the protection of laboratory staff</li></ul>		Disease Control Agency Animal Health Laboratory Ministry of Defense	US Department of Disease Control, Thailand's Department of Disease Control Singapore Department of Disease Control Next Generation
The third year	<ul style="list-style-type: none"><li>Evaluate and strengthen the preservation mechanism of controlled pathogens</li><li>Implement a unified education training and personnel certification mechanism</li><li>Evaluation increases personnel reliability</li></ul>		Disease Control Agency Animal Health Laboratory Ministry of Defense	US Department of Disease Control, Thailand's Department of Disease Control Singapore Department of Disease Control Next Generation
fourth year	<ul style="list-style-type: none"><li>Planning to strengthen the preservation mechanism of controlled pathogens</li><li>Review and review the unified education training and personnel certification mechanism</li><li>Plan to increase personnel reliability</li></ul>		Disease Control Agency Animal Health Laboratory Ministry of Defense	US Department of Disease Control, Thailand's Department of Disease Control Singapore Department of Disease Control Next Generation
fifth year	<ul style="list-style-type: none"><li>Implementation of a preservation mechanism to strengthen control of pathogens</li><li>Implementation improves personnel reliability</li></ul>		Disease Control Agency Animal Health Laboratory Ministry of Defense	US Department of Disease Control, Thailand's Department of Disease Control Singapore Department of Disease Control Next Generation

# GLOBAL HEALTH SECURITY AGENDA

## ROADMAP

### REPUBLIC OF CHINA(TAIWAN)

November 15, 2017

## Introduction

In order to prevent global health security threats posed by infectious disease, The United States along with many international organizations, such as the World Health Organization (WHO), the Food and Agricultural Organization (FAO), and the World Animal Health Organization (OIE) , have initiated the “Global Health Security Agenda (GHSA)”. The target of the GHSA is to assist developing countries to meet the core competencies of International Health Regulations (IHR) as soon as possible and to strengthen the global health and safety systems through multilateral cooperation. With the One Health Concept and approach, Taiwan actively participates in international activities and conducts Joint External Evaluation (JEE) to assess Taiwan's capacities and capabilities of disease prevention. The valuable experience from the JEE assessment will not only be a benchmark for improving national capacity of disease prevention but also a platform for communicating with international countries. Taiwan is willing to share its experiences regarding the JEE assessment and help other countries to meet ultimate goal of one health together.



## Formulation and Elements of the Taiwan GHSA Roadmap

Joint External Evaluation (JEE) is a comprehensive assessment of Taiwan's public health on a national level. The JEE Report points out the level of capabilities, strengths, and areas that need to be strengthened for each of the 19 capabilities (elements). The Taiwan CDC (TCDC) holds meetings in regards to the JEE Report with government experts in the fields of animal and human health, including the Executive Yuan's Council of Agriculture. During these meetings, the government experts recommend solutions necessary in improving the 3 capabilities, which include Zoonotic Disease, Antimicrobial Resistance, and Biosafety and Biosecurity. The JEE Report, recommendations from government experts, and related references were used to create a roadmap of these three capabilities modeled after the GHSA Roadmap Template provided on the GHSAwebsite.

## List of Acronyms

AHRI	Animal Health Research Institute, Council of Agriculture, Executive Yuan, Taiwan Antimicrobial
ASP	Stewardship Program
BAPHIQ	Bureau of Animal and Plant Health, Inspection, and Quarantine, Council of Agriculture, Executive Yuan, Taiwan United States Centers for
CDC	Disease Control and Prevention
CDD	Communicable Disease Division, Ministry of Health, Singapore Council of
CoA	Agriculture, Executive Yuan, Taiwan
DDC	Department of Disease Control, Thailand
EPA	Environmental Protection Administration, Executive Yuan, Taiwan Food and
FAO	Agriculture Organization of the United Nations Healthcare-Associated Infection
HAI	
MOHW	Ministry of Health and Welfare, Taiwan Ministry of
MOND	National Defense, Taiwan National Health Research
NHRI	Institutes, Taiwan Next Generation Network
NGN	
QNDOH	Quang Ninh Provincial Department of Health, Vietnam
SFAA	Social and Family Affairs Administration, Ministry of Health, Taiwan Taiwan CDC
TCDC	
TFDA	Taiwan Food and Drug Administration

## Prevent

### Zoonotic Diseases

GHSAGoal	GHSAObjective	GHSA 5-Year Target	
Prevent Avoidable Epidemics	Preventing the emergence and spread of antimicrobial drug resistant organisms and emerging zoonotic diseases and strengthening international regulatory frameworks governing food safety.	Adopted measured behaviors, policies and/or practices that minimize the spillover of zoonotic diseases from lower animals into human populations.	
5-Year Goal: Strengthen and integrate prevention, surveillance, laboratory, and response capacities to minimize the spillover and transmission of zoonotic diseases between animal (domestic and wild) and human populations.			
Term	Key Milestones	Responsible Taiwan Body	International Partners
Year 1	<ul style="list-style-type: none"><li>One Health Policy developed</li><li>Start planning for the One Health Training program, including classrooms, trainee program and online courses</li><li>CoA's disease reporting mechanism evaluated</li><li>TCDC and CoA's information exchange mechanism (including surveillance system) evaluated</li></ul>	TCDC, BAPHIQ	CDC, FAO, QNDOH, NGN
Year 2	<ul style="list-style-type: none"><li>One Health Council and Coordination Center developed Cooperation program with veterinary schools evaluated</li><li>Disease cooperation and information exchange between TCDC and CoA (avian influenza) conducted</li><li>Innovative approach to the CoA's disease reporting mechanism developed One Health</li></ul>	TCDC, BAPHIQ	CDC, FAO, QNDOH, NGN
Year 3	<ul style="list-style-type: none"><li>Training program conducted</li><li>TCDC and CoA's information exchange mechanism developed</li><li>Disease cooperation and information exchange between TCDC and CoA ( ) conducted Improvements to</li><li>CoA's disease reporting mechanism conducted</li></ul>	TCDC, BAPHIQ	CDC, FAO, QNDOH, NGN

Year 4	<ul style="list-style-type: none"> <li>• Disease cooperation and information exchange between TCDC and CoA (rabies) conducted</li> <li>• Information exchange mechanism between TCDC and CoA established</li> <li>• Cooperation program with veterinary schools established</li> </ul>	TCDC, BAPHIQ	CDC, FAO, QND OH, NGN
Year 5	<ul style="list-style-type: none"> <li>• Conduct disease cooperation and information exchange between TCDC and CoA (other diseases)</li> <li>• Review the previous four years' completed tasks and strengthen any weaknesses found</li> </ul>	TCDC, BAPHIQ	CDC, FAO, QND OH, NGN

## Antimicrobial Resistance

GHSAGoal	GHSAObjective	GHSA 5-Year Target		
Prevent Avoidable Epidemics	Preventing the emergence and spread of antimicrobial drug resistant organisms and emerging zoonotic diseases and strengthening international regulatory frameworks governing food safety.	Develop an integrated and global package of activities to combat antimicrobial resistance, spanning human, animal, agricultural, food and environmental aspects (ie a one-health approach), including:  a) Taiwan has its own national comprehensive plan to combat antimicrobial resistance; b) strengthen surveillance and laboratory capacity at the national and international level following agreed international standards developed in the framework of the Global Action plan, considering existing standards and; c) improved conservation of existing treatments and collaboration to support the sustainable development of new antibiotics, alternative treatments, preventive measures and rapid, point-of-care diagnostics, including systems to preserve new antibiotics.		
5-Year Goal: Prevent and control the emergence and spread of AMR through effective and rational use of antimicrobials in humans and animals.				
Trem	Key Milestones		Responsible Taiwan Body	International Partners
Year 1	<ul style="list-style-type: none"><li>Evaluate surveillance system structure in TCDC, BAPHIQ, TFDA, EPA</li><li>Evaluate Antimicrobial Stewardship Program (ASP) Reward Mechanism</li><li>Evaluate FarmAMR Surveillance Systems</li></ul>		TCDC, BAPHIQ, TFDA, EPA, NHRI	CDC, NGN
Year 2	<ul style="list-style-type: none"><li>Environmental pathogens that the TCDC, CoA and EPA have agreed to jointly monitor evaluated</li><li>ASP Reward Mechanism developed</li><li>National Integrated AMR Surveillance system developed ASP Reward</li></ul>		TCDC, BAPHIQ, TFDA, EPA, NHRI	CDC, NGN
Year 3	<ul style="list-style-type: none"><li>Mechanism implemented and functioning</li><li>Joint Environmental Pathogen Surveillance System developed</li><li>HAI prevention and control programs and ASP mechanisms for communities developed</li></ul>		TCDC, BAPHIQ, EPA, SFAA, NHRI	CDC, NGN
Year 4	<ul style="list-style-type: none"><li>FarmAMR Surveillance Systems established</li><li>HAI prevention and control programs and ASP mechanisms for communities expanded</li></ul>		TCDC, BAPHIQ, SFAA, NHRI	CDC, NGN

Year 5	<ul style="list-style-type: none"> <li>• Integrated AMR Surveillance System established</li> <li>• Joint Environmental Pathogen Surveillance System established</li> <li>• HAI prevention and control programs and ASP mechanisms for communities established</li> </ul>	TCDC, BAPHIQ, TFDA, EPA, SFAA, NHRI	CDC, NGN
--------	--	-------------------------------------	----------

## Biosafety and Biosecurity

GHSAGoal	GHSAObjective	GHSA 5-Year Target		
Prevent Avoidable Epidemics	Promoting national biosafety and biosecurity systems.	Awhole-of-government national biosafety and biosecurity system is in place, ensuring that especially dangerous pathogens are identified, held, secured and monitored in a minimal number of facilities according to best practices; biological risk management training and educational outreach are conducted to promote a shared culture of responsibility, reduce dual use risks, mitigate biological proliferation and deliberate use threats, and ensure safe transfer of biological agents; and country-specific biosafety and biosecurity legislation, laboratory licensing, and pathogen control measures are in place as appropriate.		
5-Year Goal: National biosafety and biosecurity system strengthened to ensure that dangerous pathogens are identified, held, transferred, secured and monitored in a minimal number of facilities according to best practices.				
Term	Key Milestones		Responsible Taiwan Body	International Partners
Year 1	<ul style="list-style-type: none"><li>Consolidation and storage of dangerous pathogens into a small, controlled set of laboratories completed</li><li>Standard biosafety and biosecurity training mechanisms developed</li><li>Protections for workers in laboratories developed</li></ul>		TCDC, AHRI, MOND	CDC, DDC, CDD, NGN
Year 2	<ul style="list-style-type: none"><li>Standard biosafety and biosecurity training mechanisms established</li><li>Protections for workers in laboratories implemented</li></ul>		TCDC, AHRI, MOND	CDC, DDC, CDD, NGN
Year 3	<ul style="list-style-type: none"><li>Strengthening of biosecurity mechanisms against select agents and toxins evaluated</li><li>Standard biosafety and biosecurity training mechanisms implemented</li><li>Personnel reliability improvements evaluated</li></ul>		TCDC, AHRI, MOND	CDC, DDC, CDD, NGN
Year 4	<ul style="list-style-type: none"><li>Plan for strengthening of biosecurity mechanisms of select agents and toxins developed</li><li>Review standard biosafety and biosecurity training mechanisms</li><li>Personnel reliability improvements developed</li></ul>		TCDC, AHRI, MOND	CDC, DDC, CDD, NGN

Year 5	<ul style="list-style-type: none"> <li>Strengthening of biosecurity mechanisms of select agents and toxins implemented</li> <li>Personnel reliability improvements implemented</li> </ul>	TCDC, AHRI, MOND	CDC, DDC, CDD, NGN
--------	---	------------------	--------------------



## 五、舉辦國際論壇

The initial requirement of this project was to handle international forums, but the team was requested by the Disease Control Department to bid

A total of two international forums will be held in Chiang Mai, Thailand. One is to go to Chiang Mai, Thailand to participate in the stream

Medical and Public Health Prevention Training Network ( Training Programs in Epidemiology and Public Health Interventions Network,

TEPHINET) , The 9th Global Joint Epidemiology held jointly with the Thai Ministry of Health

And public health science forum, and hold a pre-conference workshop. TEPHINET Is by the World Health Organization ( WHO)

And the U.S. Department of Disease Control ( CDC) in 1997 Supported the establishment of an international organization in 2015, with the purpose of establishing health investigat

Class ( Field Epidemiology Training Program, FETP) The main purpose of mutual cooperation is to strengthen the flow of

Exchanges between the medical and public health communities, through oral papers or poster papers, to share with each other in the epidemic

Investigate and promote various achievements and experiences in public health work. my country in the Republic of China 87 Joined in TEPHINET

After becoming a member, the Disease Control Agency regularly recommends epidemic prevention physicians and FETP Participants actively participate in the biennial global

The conference and the biennial Asia-Pacific regional conference share with the rest of the world their efforts in my country's public health work, and propose

High visibility of international participation. The second is to handle international forums and control fake diseases in the fake Taipei Medical University's Chengpu Hall

The department coordinated the command center to handle the round table meeting, and assembled the actual implementation at home and abroad JEE Evaluation officials and e

Participate in experience sharing and exchanges. Details are shown in Appendix IV.

### ( A) The 9th TEPHINET Pre-conference workshop

- time: 2017.08.04~08.09
- Location: Chiang Mai, Thailand

#### 1. Description of the preparation process:

At the beginning of the implementation of this plan, the preparations for this pre-conference workshop were started, such as drafting the conference theme,

Schedule and use the channels established by the host and co-hosts of this project to devote themselves to relevant academic exchange platforms for many years,

Invite domestic and foreign experts and scholars to send the country to participate JEE Experienced experts or key executives participate, and refer to

JEE In the assessment report, if the assessment committee is from a new southbound country, it will be listed as the scheduled invitation. Co-host Qiu Ya

Professor Wen went to South Korea in February this year to participate in the Asia-Pacific Public Health Academic Alliance ( Asia-PacificAcademic Consortium for

Public Health, APACPH) At the meeting of the Executive Committee, Professor Liu Huayun from the University of Malaya

The next chairman of the Technical Alliance), the National University of Singapore, and the Mathieu University in Thailand invite or recommend their domestic JEE Related

The experts, scholars or actual executives. At the same time, Associate Professor Cai Fengzhen, the co-host of this project, handled the pre-conference work

Workshop and TEPHNIET The bilateral contact window of the person in charge, TEPHNIET When the relevant pre-conference workshop

application information was announced on the conference website, the host of this project, Professor Guo Naiwen, and the Deputy Director of the CDC immediately asked for instr

Please submit the content of the document to be submitted to TEPHNIET

Relevant personnel, during the application process, this project invites the deputy director of the Department of Disease Control of the Ministry of Health of Thailand Dr. Tanarak P

Senior Officer of the Bureau of Epidemiology Ms. Kiratikarn Kladsawad Come to Taiwan for a visit, and Dr. Tanarak Plipat

The deputy director mentioned that this project has been applied for in August, Chiang Mai, Thailand TEPHNET Pre-conference workshop, also in Thailand

this time TEPHNET The organizer of the conference, Dr. Tanarak Plipat The deputy director immediately assisted in the review progress of our application documents. WHO Related terminology that may confuse participants from various countries

The workshop was organized by the World Health Organization inappropriately, so Associate Professor Cai Fengzhen and TEPHNET Main window

After conducting a conference call and assisting in intermediate contact matters and confirmation, submit the revised application documents and subsequent payment of related fees

Submit, after confirming the completion of the application for the pre-conference workshop, this plan will not only conduct internal preparations and discussion meetings for this event

Before the meeting, confirm the contents and procedures of the meeting with Deputy Director Luo Jun of the Disease Control Department and colleagues

Meeting before the trip.

## 2. Agenda:

The theme of the workshop was set as " FETP and Evaluation of Preparedness: Experience Sharing ", the speaker will

Dean Guo Naiwen, Deputy Director Luo Yijun and Huang Songen Epidemic Prevention Physician will be the host of this project.

Row 45 Minutes~ 1 Hours, looking forward to the participation of the southbound countries interested in participating JEE Assessment or for its

domestic JEE Experienced experts or key executives. By sharing Taiwan's experience in participating in external evaluations and FETP The role of three

Speakers shared participation in external evaluations and FETP Experience, including face-to-face dialogue with external evaluation experts and

During the process of my assessment and on-site visit, a demonstration of the actual assessment process will also be provided during the event.

The attention and experience sharing of external evaluation and the establishment of a communication platform for opinion exchange and experience learning. After the workshop

Participants will learn more about external evaluations and FETP Role in evaluation.

Associate Professor Cai Fengzhen of this project 7 When I went to Mahidol University in Thailand as a short-term visiting professor, I assisted in inviting Thai

Foreign guests, — is responsible for the Thai CDC IHR and JEE Official and veterinarian of the Epidemiology Bureau, Ministry of Health, Thailand Dr.

Teerasak Chuxnum , The other is a former Thai IHR Focal Point Now a lecturer at Mahidol University Dr. Ajchara

Vararuk , The above two will be the moderators of the workshop and the talker of the session.

## 3. Achievement description:

The pre-conference workshop is the first international forum organized by the Disease Control Agency in a foreign country. Associate Professor Cai Fengzhen

Acting as the emcee of ceremonies, and invited Thai foreign guests to be the host and talker of the first and second lectures. The foreign guests are Thailand

The CDC is responsible IHR and JEE Official and veterinarian of the Epidemiology Bureau, Ministry of Health, Thailand Dr. Teerasak Chuxnum ,

And formerly in Thailand IHR Focal Point , Now a lecturer at Mahidol University Dr. AjcharaVararuk . Except for two Thai foreign guests

He played an important role in the workshop. Professor Qiu Yawen also served as the host and talker of the third lecture. This workshop

Attracted from Taiwan, China, India, Indonesia, Malaysia, Mozambique, Myanmar, Namibia, the Philippines

Libin, Luanda, Pakistan, Thailand, Isopia, Uganda, etc. 14 Country, total 33 People are present. Workshop

For the first time, Dean Guo Naiwen said " Promoting Health Security: Potential- Role, and Future Directions of a Medical University "Gave a speech

on the topic; then the disease prevention physician Huang Songen of the Department of Disease Control and Prevention JEE

Lessons Learned "" as the title, with Taiwan FETP Former executive status, share Taiwan JEE The assessment experience provides students from

various countries to think about and discuss the problems facing the future; finally, the deputy director of the Department of Disease Control Luo Yijun will give a final lecture " Fac

## Highlighting FETP in Preparedness and Risk Communication "

, From the standpoint of preparation and risk, throw

Various questions were raised for students to reflect on and promote opportunities for future cooperation in epidemic prevention with other countries.

### 4. Integration and analysis of feedback from students:

Collected from questionnaires, there are China, India, Indonesia, Malaysia, Mozambique, Myanmar, Namibia

Asia, the Philippines and Luanda, etc. 9 country 11 Participants provided the experience and feedback of participating in this workshop. Most of

the feedback was highly praised, expressing that through the interactive process of the speaker and the students and the exciting reflections of each other, they exchanged experi

At the same time, it also allows the participants to understand the Taiwan experience. In addition to the above feedback, the participants also give other feedback, such as

Trainee from Myanmar: "The cooperation between the government and academia is of great importance to national health and safety." Trainee from Namibia:

"Students from all countries need the country CDC Support to achieve participation TEPHNIET After the meeting, get information and experience

exchanges from different countries, as well as follow-up suggestions to improve the country" and Luanda students: "We should think about how

Continuous support FETP And how to enable trainees who have completed the training to enter public health institutions and use their professional

Skills and play a role, not only for the investigation of emergencies, but also FETP Interns opportunities to enter

The community conducts educational activities". Based on the opinions of the above trainees, it can be seen that the number of participants and the participating countries of this v

For the extra-period gains, the exchanges between countries in the process have also reached the goal of this workshop.



Figure 19. TEPHINET Group photo of participants in the pre-conference workshop

### ( 2) International Forum (Taipei Show)

- time: 2017.11.08
- Venue: Chengpu Hall, Taipei Medical University
- Conference description:

#### 1. Activity summary:

Recent years SARS , H1N1 Novel influenza, Ebola virus hemorrhagic fever, MERS-CoV( Morse) and other emerging infections

Diseases emerge in endlessly, and with climate change and the increasing frequency of international exchanges, the epidemic prevention system is facing the impact of emerging Challenge, given this 2014 International organizations and the United States, Britain and other countries promoted the global health security agenda ( Global Health SecurityAgenda, GHSA) , Extensive project development evaluation tools for prevention, detection and response, implementation and improvement The ability of the world to jointly fight the threat of infectious diseases. And our country 2015 With the assistance of the United States, actively participate in GHSA Related activities and on 2016 year 6 month twenty one Day to 7 month 1 During the day, complete with JEE (Joint External Evaluation) On-site evaluation of tools to identify the priority needs of the country's health and safety system, and improve my country's health A safe amount of energy.

The School of Public Health, Taipei Medical University has been committed to the professional promotion of global health security in recent years and established the "Global Doctor of Health and Safety" , And promote our country's participation in health and safety affairs through international cooperation. against GHSA versus JEE Relevant issues cooperate with the United States, Southeast Asian countries or countries with diplomatic relations to develop epidemic prevention cooperation strategies. In order to increase my country's energy in health and safety, and to build the goal of integrated epidemic prevention and global health. The School of Health held the "Practice of Global Health Security and International Health Regulations: Strengthening Cooperation Department" International Forum, in which experts and scholars from the United States, Belize, Singapore, Malaysia, Thailand and South Korea are invited Together with government officials, the Ministry of Health and Welfare, the Department of Disease Control of the Ministry of Health and Welfare, and the Agricultural Committee of Health and Welfare. And other public sector representatives and related scholars in the field of public health to discuss and exchange, looking forward to consolidating domestic industry, government, and academia. All walks of life will jointly strengthen transnational cooperation, talent training and sustainable development for global health and safety. In addition, I also hope to cooperate with the United States to Establish an epidemic prevention cooperation channel or platform with the country to promote my country's research cooperation plan on global health Increased the capacity of the side's epidemic prevention personnel.

## 2. Achievement description:

Based on the experience shared by experts from various countries in the forum, in the face of major public health threats, epidemic prevention is integrated ( One Health) It is a common policy in all countries. Speakers from various countries emphasized the importance of inter-departmental cooperation. Cross-departmental cooperation In order to detect and collect information from all parties, formulate effective strategies and division of labor, each unit fulfills its responsibilities to prevent React quickly when an incident occurs. And in our country JEE In the report, it was found that some of the projects Fully comply with international health regulations IHR Standard ( interagency and cross-sectoral collaboration in Taiwan is not optimal for fully achieving some IHR capabilities.) , If compared with the cooperation between the Disease Control Agency and the Food and Drug Administration, the cooperation between the Disease Control Agency and the Agriculture Committee is less ( While TFDA and TCDC work well together, there seems to be less collaboration at both the national level between TCDC and CoA and the local level between public health and agricultural authorities) Wait.

In addition to the cooperation between various ministries and conferences in the country, the cooperation between countries is also the focus of the speakers, such as the Dr. Tanarak Plipat At the meeting, he said that Malaysia and Thailand cooperate closely, which is a good example of South Asian countries cooperating to face health security threats. But in our country JEE It is mentioned in the report: Due to the special international situation, our country cannot achieve Formal WHO Member States, cannot participate in some IHR The core project ( Because of its unique international political status, Taiwan is not a full member state in theWHO and, therefore, cannot participate

in some international programs that support IHR capabilities.) , So how to promote the relationship between our country and other countries

The cooperation is also an important topic at present.



Picture 20. Group photo of the head of the International Forum and foreign guests

### ( Three) Round table discussion meeting

- time: 2017.11.09
- Location: Department of Disease Control
- Conference description:

The round table discussion meeting is divided into 3 The themes of each session are as follows: Human-Animal, Antibiotics and Resistance, Biological

The key points of safety and biological preservation are as follows:

#### 1. Enhancing the information exchange and education training mechanism between the Council of Agriculture and the CDC

- Department of Disease Control:

A four-year integrated anti-epidemic plan has been carried out, and an automatic data exchange mechanism with the Council of Agriculture will be established;

The data formats of the two parties are different, and the project schedule for the exchange of data is expected to be: rabies, avian influenza, and tuberculosis.

- Animal and Plant Inspection and Quarantine Bureau:

##### (1) Complete the establishment through the food-borne (infectious disease) project and the Food and Drug Administration (hereinafter referred to as the Food and Drug Admin

The department's common database and a communication platform for tripartite business management personnel can be quickly transmitted to each other.

##### (2) Major zoonotic diseases must be twenty four Report to the health authority within hours. A zoonotic disease

There are highly pathogenic avian influenza, Rift Valley fever, type B rabies, low pathogenic avian influenza, West Nile fever, charcoal,

Bovine tuberculosis, bovine brucellosis, bovine spongiform encephalopathy, etc., after inspection and confirmation twenty four Announcement of disease management w

Department.

#### 2. Antibiotic resistance and management of human and animal antibiotics

- Department of Disease Control:

CDC at 2013 Started the implementation of the antibiotic management plan, and then established the national antibiotic resistance system (national antimicrobial resistance system) , And collect information on antibiotic susceptibility through the hospital laboratory Complete analysis to improve this system.

- Animal and Plant Inspection and Quarantine Bureau:

- (1) Current antidrug genes ( mcr-1) Start monitoring, the target is the animal farm, and collect funds in the mooring bar material. However, the drug resistance database has not been communicated with the CDC. Currently, the two parties first collect related strains.
- (2) The farmer's mastery of the antibiotic dosage is calculated from the animal dosage, and the basis includes the system registered by the Food and Drug Administration. The amount of production is compared with the amount of foreign imports, and the amount of domestic animal drugs used is estimated.
- (3) Inspection Bureau at 2000 The item of antibiotics that can be added to feed has been gradually deleted from the beginning of the year and has been deleted 36 Item Only animal-specific antibiotics exist 9 item.
- (4) The Bureau of Inspection and Quarantine monitors the antibiotic residues of listed animals in the pasture, and the pass rate exceeds 99.9% ; Fake and shoddy Drug check, incidence 2% the following.

### 3. Controlled pathogens (high-risk pathogens) and biotoxin management strategies-biosafety and biosecurity

- Department of Disease Control:

- (1) Guidelines for the management of regulated pathogens have been formulated, and the 17 Home down to 9 Family.

The possession, use, and transfer of the agency must be verified by the Department of Disease Control and passed in the "Laboratory Safety Management Information S Log in; both laboratory personnel and laboratory supervisors should receive policy promotion and education and training related to controlled pathogens.

Dual-use research ( DURC , dual use research of concern) The management of the

13 A regulated pathogen. Institutional Biosafety Committee ( IBC) The meeting shall review and supervise the application plan and approve the new The research plan is submitted to the CDC for reference.

- (2) Taiwan does not enforce the concentration of controlled pathogens in specific laboratories.

- Animal and Plant Inspection and Quarantine Bureau:

The relevant measures for the management of animal infectious biological materials have been drafted and will be released as soon as possible.





Figure 21. Photos of domestic and foreign experts



Figure 22. Antibiotics and resistance experts discussing photos



Figure 23. Photos of domestic and foreign experts on biosafety and biosecurity

#### ( Four) Summary of this section

A total of two international forums and round tables will be held in this plan: the 9th TEPHINET Pre-conference workshop (Thailand National Chiang Mai), "Practicing Global Health Security and International Health Regulations: Strengthening Cooperation" International Forum (Taipei field)( 2017.11.8) , And a roundtable discussion consultation meeting with domestic and foreign experts ( 2017.11.9) .

the ninth TEPHINET Pre-conference workshop The first international forum organized by the Department of Disease Control in a foreign country,

Participating countries 14 Country, total 33 People attend, through the interactive process of the speaker and the trainees and mutual

reflections, mutual exchanges of experiences from various countries, and at the same time let the participants understand the experience of Taiwan and have more exchanges.

"Practicing Global Health Security and International Health Regulations: Strengthening Cooperation" International Forum invited six countries

Eight officials and experts from Action Packages Implementation status, GHSA Experience and NGO Organization in the whole

The most important message this time is: cross-departmental cooperation, only cross-sectoral

Only when the departments cooperate can detect and gather information from all parties, formulate effective strategies and division of labor, and each unit fulfills its responsibilities

It is easy to prevent and respond quickly when incidents occur, achieving the concept of integrated epidemic prevention.

The roundtable discussion and consultation meeting of domestic and foreign experts is aimed at my country JEE Common infectious diseases, antibiotics and

The three themes of drug resistance, biological preservation and biological safety, invite foreign experts and representatives of my country's agricultural, health and epidemic prev

Experts and scholars conduct cross-border opinion exchanges and consultations, integrate domestic and foreign experience and current conditions, and plan for my country's thre

The strategic road map for the future, the future of health, safety and epidemic prevention will be more strengthened.



## ~~Publication of research results~~ 出版策略成果報告

According to the project's needs, the project team integrated relevant data, such as evaluation and investigation, talent cultivation, strategic planning and discussion

The content of the achievements of the forum is submitted to the Disease Control Agency and compiled into a strategy report to be published and distributed to each

Participating groups and individuals, the final report has been 11 month 15 The report will be submitted to the Disease Control Agency in Japan,

and subsequent amendments will be made in accordance with the amendments.

## 七、需求规格外完成事项

In response to policy adjustments, this plan 5 month 12 Assist the CDC in handling an inter-departmental " JEE Sharing meeting". Through this meeting, I would like to thank the department for this opportunity to bring in the planning team of Taipei Medical University, so that the two sides can start exchanges Window and find the most suitable cooperation mode.



Figure 24. Director Zhou Zhihao replaced JEE Opening photo of the sharing session

In addition, in order to establish cooperation with new southward countries for epidemic prevention technology transfer centers, in addition to planning requirements and sp Borrow from Chiang Mai, Thailand TEPHINET Outside the conference management workshop, and recommended by the scholars of Mathidow University Candidates, arrangements 8 month 6 On the afternoon of the day, the project's Dean Guo Naiwen, Director Qiu Yawen, Teacher Cai Fengzhen and the Department of Disease C Deputy Director Jun and the former Deputy Director of the Local Disease Control Service in Chiang Mai, Thailand ( Office of Disease Prevention & control, Department of Disease Prevention & control, Ministry of Public Health, Thailand ) Dr. Piyada Kunawarak Ph.D. and current officials of the Department of Disease Control Dr. Thitipong Yingyong Physician, for the knot Nuclear disease prevention and control policies, discussions and exchanges on future cooperation.

- time: 2017.08.06
- Location: Chiang Mai, Thailand
- Conference description:



Figure 25. Group photo of the cooperation meeting of the epidemic prevention technology transfer center

In addition, in response to the importance of health and safety, Taipei Medical University took the lead in establishing a global health safety research center and The doctoral degree program in global health and health safety was established by the Ministry of Education and gathered domestic and foreign experts and scholars for everyone Think broadly to cultivate relevant talents in the future. First, the members of the research center are coordinated by Dean Guo Naiwen, and there are many Researchers, let this research center achieve transnational cooperation in the future, such as NEXTGEN , JHSPH Etc., in an unofficial capacity Participate in more important international gatherings, and use the website of this research center to regularly update global health and safety Issue information to reach a shared platform.

The school has also been approved by the Ministry of Education to add a doctoral degree program in global health and health safety, The talents of the epidemic can use this to link important national government officials and scholars, plan the basis for future cooperation, and let my country stand firmly on the ba International leadership.

## 肆、結論與具體建議 Four, conclusions and specific suggestions

The team summarizes the above results in this year's plan, and provides the conclusions and specific suggestions of the department's plan for future planning Reference for the development of health and safety policies.

### 1. Conclusions and concrete results

By JEE Evaluation report and GHSA After studying and analyzing the content of website activities and other information, combined with this year's execution plan, During the invitation process, after substantial discussions and exchanges with countries GHSA The future 5 Important issues

The conclusions and specific results of the topic and country are as follows:

( 1) From data analysis and information collection, we can know the global progress JEE Evaluation and participation GHSA Trend in the foreseeable five to

The fermentation will continue within ten years, and countries will continue to invest in activities to build their core health and safety capabilities. because nice country As the main GHSA Initiating the country, also by the United States 2016 Assist our country to complete JEE Evaluation report, in order to maintain GHSA Contact channels between relevant units and experts and scholars, the project team will visit this year 3 Second beauty China, respectively visit the George Washington University School of Public Health Dr. Rebecca Katz professor, Next Gen The person in charge Dr. Jamechia Hoyle , And participated in the 3rd Global Biosafety Summit.

The United States has developed the most advanced science and technology for detecting biosafety, and participated in the John Hopkins

Health Security Center Held at the U.S. Capitol " What is needed now to prepare for

major health emergencies Meetings, etc., through the process of information gathering and actual exchange visits, specific results can be obtained such as under:

1. Next Gen For continuous and close participation GHSA Of NGO , Its person in charge Dr. Jamechia Hoyle Association

Help our country participate in the Uganda event held at the end of October this year GHSA The 4th Ministerial Conference, and its deputy Chairman Dr. Taylor Winkiemba In November, he came to Taiwan to participate in the International Health and Safety Forum and Roundtable Conference, and gave substantial suggestions on my country's health and safety policies.

2. Participation by John Hopkins Health Security Center Held at the U.S. Capitol What is

needed now to prepare for major health emergencies "Meeting, inviting regional epidemic prevention officials to

Will explain the role and importance of the permanent public health system in epidemic prevention and response to public health emergencies

In addition, from the perspective of global health and safety, it explains the continuous participation and promotion of JEE The importance of the system is determining

This calls on the U.S. Congress to retain and increase the relevant budget, rather than cut it. After the meeting and health and safety

The staff of the whole center exchanged opinions and discussed the different aspects of my country and the United States in the global health security section

Cooperation, discussion of information exchange and follow-up work promotion. The project team then made an invitation John

Hopkins Health Security Center representative Dr. Thomas V. Inglesby Come to Taiwan to participate in November International

Forum, the response received was that due to the positive results of the efforts of its Health Security Center, the US government approved the budget

Review and let GHSA Can continue to develop, so this year because of busy schedule declined to attend this international forum, and

Means the future GHSA versus JEE Such topics are very willing to continue exchanges and discussions with our country.

3. Participated in the 3rd Global Biosafety Summit, from which many Americans

The most advanced science and technology for safety, and then the co-host of this project, Associate Professor Cai Fengzhen, and our country

The ambassador is also the Chair Professor Guo Xusong of the School of Public Health of our school and co-published in the Taiwan Journal of Public Health

The article "Building a Public-Private Partnership for the Prevention and Control of Infectious Diseases CEPI Alliance and American

BARDA "Talking", put forward my country's specific and clear health and safety policy recommendations.

4. Dr. Rebecca Katz The professor currently obtains funding from the United States Department of Disease Control to establish and

operate a research center with global health and safety as the main research theme at Georgetown University, handling all countries JEE the first

Hand data, you can see the results of the private internal evaluation, so it is the core of the development of global health security in the United States

One of the characters, instead of establishing substantive academic research, it will help our country have a deep understanding of global participation JEE Comme

Core internal and external information.

5. Dr. Rebecca Katz The professor also recommends and is willing to assist our country in participating 2019 year 6 month 18 Day to 20 Day in

The first International Conference on Global Health and Safety held in Sydney, Australia.

( 2) In addition, with Indonesia, Thailand, Vietnam, Malaysia, Singapore, Belize and South Korea have established substantial academic, official

The communication channel between the party and the unofficial. The specific results of the implementation of the plan this year in various countries are as follows:

1. Indonesia: Through the process of information collection and evaluation, Indonesia will 2017 Complete before the end of the year JEE

Assessment report, and Indonesia is GHSA "Management of infectious diseases common to humans and animals" action plan Leading Countries one.

- The host of this project, Professor Guo Naiwen, and co-host, Director Chen Zaijin, Yu 11 month 29 Day to 12 month

2 Visited Indonesia on Japan and invited to the Health Department of Central Java, Indonesia Mr. Yulianto Prabowo hall

Director, Project Development Committee Mr. Sujarwanto Dwiatmoko Chairperson, CDC Mr. Sigit Armunant Director and

Community Health Center Mrs. Suharsi Director Yu 12 month 19 Day to twenty three Day come

Taiwan visit, arranged at twenty one I went to the Department of Disease Control and Prevention to meet on the day to share the country's medical environ

Fever Wait for the current situation, establish a communication channel or platform for epidemic prevention between the two parties, and negotiate the trans

Reproductive cooperation matters. But before the trip, because West Java 12 month 15 Day and night 11 Time 50 There

was a strong earthquake on the left and right sides, spreading to Central Java Province, causing two officials to come due to the Mr. Sigit and Mrs.

Suharsi The visit has been successfully completed. The communication part with the Department of Disease Control was led by Deputy Director Luo

Attended the meeting with the host of this project and three co-hosts, the process was complete and fruitful.

2. Thailand: From the process of information collection and evaluation, we know that Thailand is JEE The score of the assessment report is compared with that of ou

Strength has yet to be improved, but Thailand is in the "Biosafety and Biosecurity" , "Chemical incident" and "Radiation

The scores of items such as "emergency events" are better than those of our country,

Development" and other action plan projects Leading Countries One of them, and the project successfully invited the Thai Disease

Control Agency Dr. Tanarak Plipat The deputy director came to Taiwan for the second time, which is the country with the highest

level of personnel invited for this project, which shows Thailand's academic and official sincerity and high willingness to cooperate. Collection and substance

The specific results of the mutual visits are as follows:

- The host and co-host of the project team visited Thailand in May, July and August respectively. The process  
Zhongzhi's visits and contacts and exchanges are mainly for assisting the Disease Control Agency's first international  
The forum was successfully held. The results of this forum attracted people from Taiwan, China, India, Indonesia,  
Malaysia, Mozambique, Myanmar, Namibia, Philippines, Luanda, Pakistan, Thailand  
Countries, Ethiopia, Uganda, etc. 14 Country, total 33 People are present.
- The project team started from the bilateral exchange of visits, in addition to successfully assisting my country's Disease Control  
In addition to international forums, it also assisted the Disease Control Agency to obtain 2020 Hosted by my country TEPHINET  
Regional annual meeting.
- This year the project invited the Deputy Director of the Thai Disease Control Agency for the second time Dr. Tanarak Plipat And subordinate Thailand  
Bureau of Epidemiology, IHR Senior officials of the capacity development team Miss Kiratikarn Kladsawad versus  
Leader of the sixth group of the disease prevention and control group of the Thai disease control agency Dr. Hansa Ruksakom , Respectively in June  
And visited Taiwan in November, and went to the Disease Control Department to meet Director Zhou Zhihao, Deputy Director Luo Jun and  
Colleagues in the department, sharing the country's medical and health system, GHSA versus JEE , TB , Dengue Fever Wait  
Currently, to assist this project in applying for the pre-conference workshop of the International Forum held in Chiang Mai, Thailand in August  
Industry; came to Taiwan to participate in the international forum in November, GHSA and JEE On, provide some guidance for the project team  
Guide and suggestions, and share Thailand GHSA and JEE The evaluation experience.
- Through the communication channel established with Mathieu University in Thailand and its officials, the co-host Cai Feng of this project  
Associate Professor Zhen will participate 2018 year 1 month 29 Day to 2 month 3 In Bangkok, Thailand Prince  
Mahidol Award Conference (PMAC) The annual health policy-related international conference, the theme of this  
year's Making the World Safe from the Threats of Emerging Infectious Diseases "

And known GHSA The important people will be there. In addition, this project suggests to send personnel to participate in Thai

State Yu 2018 year 2 month 5 Day to 7 Held "Regional Conference on Development of National Laboratory Energy and

Epidemic. By 2018, the annual conferences held in Thailand at the beginning of the year can be seen in Thailand GHSA Play a heavy role

For the determination and strength of the role, it is suggested that our country should further cooperate with Mathieu University in Thailand

Thailand's continuous interactive exchanges have strengthened our country's GHSA Participation and contribution in the global network.

3. Vietnam: Through the process of information collection and evaluation, and Vietnam JEE The assessment report shows that Vietnam's global health  
Compared with our country's strength, it can assist its projects that need to be strengthened, and Vietnam is GHSA "Human and Animal  
"Common Infectious Disease Management" Action Plan Leading Countries One, through the project team host Dean Guo  
Naiwen and co-host Professor Qiu Yawen led Professor Qiu Hongyi of the School of Public Health and  
Assistant Professor Huang Liling, Master of Global Health and Development, visited Quang Ninh Province and Hanoi, Vietnam  
Locally, Quang Ninh Provincial Health Department, Quang Ninh Provincial Health Department Preventive Medicine Center, Quang Ninh Province Tuberculosis and  
Hospital, Hanoi Medical University, Hanoi Public Health University, Vinmec International Hospital And call on  
Official of the Ministry of Health of Vietnam Dr. Vu Ngoc Long , From information collection and actual exchange visits, specific results such as

under:

- Director of Health, Quang Ninh Province, Vietnam Dr. Vu Xuan Dien Expressed willingness to work with our country CDC Signed with Taipei Medical University MoU .
- Inviting Quang Ninh Province, Vietnam Dr. Vu Xuan Dien Director, Dr. NinhVan Chu director, Dr. Phan Vu Duc The dean came to Taiwan and went to the Department of Disease Control to meet Director Zhou Zhihao, Deputy Director Luo Yijun and the department colleagues, share the country's medical environment, TB , Dengue Fever Wait for the current situation and establish an epidemic prevention joint Department of pipeline or platform.
- Through the process of bilateral exchange visits, we have assisted the Disease Control Agency in the promotion of future epidemic prevention technology transfer. This year has produced substantial cooperation benefits, and the CDC will continue to implement the cooperation plan in the future.  
Discussion.
- In addition to the cooperation in the transfer of epidemic prevention technology, the team of this project also established the  
There is a high degree of consensus on the development of cooperation between the two parties, such as infectious disease prevention and research, short-term exchange visits, vaccine safety control issues, food poisoning, electronic medical record system ( EMR ) Isotope medical and health services ( Telemedicine ) Issues such as regional cooperation, etc., can be achieved through the established communication channels between the two countries.  
Discussion and deepening of follow-up cooperation can foresee a solid cooperation relationship in the future.

4. Malaysia: Through the process of information collection and evaluation, it can be seen that Malaysia is "establishing an emergency response command center"

Of Leading Countries One, so the team invited the University of Malaya through the School of Public Health Dr.

Wah-Yun Low The professor served as a short-term visiting professor in September, through Dr. Wah-Yun Low teach

Multiple identities (Professor, University of Malaya, APACPH The next chairman of the board and director of the Asia-Pacific Public Health Academic Journal

Editor-in-chief), inviting Malaysian experts, scholars, or plan team members to visit planning, etc. to give information

Close assistance. From information collection and actual exchange visits, the specific results are as follows:

- Invite Malaysian Ministry of Health officials Dr. Tam Jenn Zhueng in 11 month 8 Day to 9 Taiwan Ginseng

**Share Malaysia's implementation GHSA "Create an emergency**

The experience of the action plan of the Contingency Command Center also establishes exchanges between the two parties through this meeting

Pipes and windows.

- University of Malaya Dr. Wah-Yun Low Professor Cum APACPH The next chairman and journal chief

Edited, from September to the school of public health as a short-term visiting professor, inviting Malaysian experts,

Scholars also provide relevant lecture courses for teachers and students of the school to facilitate the cultivation and development of talents and establish n

Communication channels, and promised to continue to serve as bilateral contacts and transfers for the follow-up exchanges and cooperation between my c

To promote and maintain good bilateral academic and official exchange channels.

5. Singapore: From the process of information collection and evaluation, it can be seen that Singapore is one of the "Biosafety System"

Contributing Countries One, so the project team used the National University of Singapore School of Public Health

Dr. Kee Seng Chia The dean's referral, the specific results are as follows:

- Invite the Singapore Department of Disease Control and GHSA principal Dr. Vernon Lee The director (as an adjunct professor at the School of Public Health of the National University of Singapore) came to Taiwan for a visit and exchange in July, and first went to disease control. The department called on Director Zhou Zhihao, Deputy Director Zhuang Renxiang and colleagues in the department to share the country TB , Dengue Fever. Wait for the current situation, and use this to establish a communication channel between the two sides for epidemic prevention, because he came to Taiwan. I'm very curious. I also arranged a visit to the National Health Department to share the country's health with Chief Secretary Wang Yiren and colleagues in the Health promotion and other issues and development status; finally, the planning team invited him to share JEE Evaluation of Experience, give the project team in Roadmap Output suggestions and guidance written.
  - Invite infectious disease experts from the School of Public Health, National University of Singapore, Singapore Dr. Clarence Tam Professor, Yu 11 Participate in the International Forum on Health and Safety Recommendations on the substance of the policy.
6. Belize: This project invites the Ministry of Health of Belize, our diplomatic country GHSA The person in charge, the medical service office long Dr. Marvin Manzanero , 11 month 8 Day to 9 Come to Taiwan to participate in international forums and roundtables, share Belize Action Packages Implementation status and GHSA versus JEE Evaluation experience.
7. South Korea: From the process of information collection and evaluation, South Korea is GHSA "Linking public health and legal professions across Departmental Quick Response" Action Plan Leading Countries One, and this year South Korea is GHSA Rotating chairmanship, so the co-host of this project, Professor Qiu Yawen and the Taiwan Regional Director of the Asia-Pacific Academic Public Health Alliance (APACPH) Go to Korea to participate APACPH During the executive committee, the Korean side will implement the plan GHSA Public Health Personnel Training Window, Yonsei University Dr. Joshua Sir The professor conducts follow-up plan exchange discussions, economic information collection and exchange visits. The specific results are as follows:
- invite Dr. Joshua Sir Professors came to Taiwan to participate in international forums and roundtables to share GHSA versus JEE The experience of the appraisal gives substantial suggestions for our country's health and safety policies.
  - In the future, we can link up with Taiwan's Disease Control Agency through school education cooperation to educate people on epidemic prevention. Training exchanges enhance our country's international participation and exchange experience.
- ( 3. For the future epidemic prevention and cultivation plan in the department, the executive team successfully penetrated into Vietnam and Indonesia, and put my country in TB , Dengue Fever The research and development of epidemic prevention technology is of international level, and it is analyzed according to the current situation and needs of the Summarize the following key points: health conditions and knowledge, epidemic prevention technology and equipment and equipment issues, which can be started in the future. The above-mentioned projects are discussed to achieve an opportunity for transnational cooperation in epidemic prevention and colonization.
- ( Four) Comprehensive assessment of the three themes of human and animal diseases, antibiotics and drug resistance, biosafety and biological preservation, Be accompanied by the corresponding literature, and according to GHSA The published data on the strategic roadmaps of various countries have completed my country's The strategy road map of these three themes, English version.
- ( 5) The themes of the three large-scale events are all buckled GHSA and JEE The assessment is mainly based on the theme setting, so that domestic and foreign experts Focus on the recent urgent issues in the country's health, safety and epidemic prevention, exchange knowledge and experience, and let the global health The importance of health safety is deeply rooted in the daily lives of more people and enhance the literacy of people at home and abroad.



## 2. Specific suggestions

Whether it's the collection of Qingsou, the itinerary of the invitation, each show GHSA and JEE Activity analysis, strategic roadmap planning and After the implementation of deep cultivation and transformation cooperation, the following suggestions have been sorted out:

1. In the course of the actual bilateral exchange visits, the plan found that officials from southbound countries from non-diplomatic countries have reviewed the visits to Be cautious, and often ask not to visit Taiwan as a (central) official, but as a scholar to be allowed to come to Taiwan easily.  
  
In the future, it is also suggested that my country should maintain a good cooperative relationship with major local universities, so as to facilitate the two sides of the Style communication. The two-track communication channel established through the academic exchange model can help break through the current foreign Where there are difficulties in implementation, we also obtain new information on epidemic prevention through contacts with other countries and enhance my country's Its visibility.
2. Establish key epidemic prevention cooperation methods with new Southbound countries. For countries with diplomatic relations, apart from civil organizations and e Cooperate directly with the central health and safety authority; for non-diplomatic countries, first cooperate with non-governmental organizations, academic research Institutions, local governments, or government officials in personal status are the window of contact and cooperation, and the scope is gradually expanded.  
  
In addition, through my country as a full member (such as: Asia-Pacific Economic Cooperation Conference APEC Asia Pacific Public Health Technical Alliance APACPH Etc.), or international non-governmental organizations ( INGO) The identity of a representative or individual expert, International government organizations related to global health security ( IGO ,Such as: WHO , OIE) Conferences and events to strengthen Enhance international participation and connect global networks.
3. related JEE For evaluation projects, my country can actively propose or introduce innovative ideas and actions to establish forward-looking Measures, that is to say JEE Assessment items are based, but not limited to these assessments, and can be initiated Create a more sophisticated approach to serve as an international benchmark ( JEE is the least, but not the last) .
4. In the future GHSA , JEE When relevant international conferences, the Participants from outsiders.
5. The future JEE The evaluation, except CDC In addition to representatives of relevant government agencies, private academic research institutions other than government agencies and NGO , NPO Representatives of the group participated in order to demonstrate the concept and deeds of i
6. To develop, formulate and implement policies to promote integrated epidemic prevention, strengthen relevant units and stakeholders (stakeholders) Participation ( engagement) And execution capabilities, related to the establishment of a cross-departmental reporting mechanism and The concept of a joint command center necessary for emergency response should be taken into consideration for priority actions.
7. In this project, the Disease Control Agency, the Food and Drug Administration and the Agriculture Committee have actively participated in various projects. Activities, such as experience sharing sessions, international forums, round tables, etc., show that each unit has the ability to cooperate And willingness.
8. In the future, we should continue the spirit of this plan, and ensure smooth cooperation channels between units under the framework of integrated epidemic prevention In order to achieve the goal of pre-prevention, early detection and rapid response.
9. Health and security threats know no borders. The project team recommends continuing to participate in the global Health and safety agenda ( GHSA) , To improve Taiwan's visibility and continue to contribute to international public health issues.
10. proceed JEE Evaluation, in addition to continuously evaluating our country's ability to face public health threats and pursuing progress, Can continue to participate GHSA Cooperation.

## 五、參考文獻

1. Qiu Yawen, Li Mingliang: The Practice of my country's Health and Safety: Fighting SARS Take for example. Editor-in-Chief Bao Zonghe: Health and Safety Theory construction and practice. Taipei: Cross-Strait Exchange Vision Foundation 2009:229-262.
2. Qiu Yawen, Huang Jingyi, Li Mingliang: National Security Implications of New Flu and Countermeasures. Strategic Security Research 2009, 50:10-13.
3. Qiu Yawen and Liu Fuguo: Examine my country's current health diplomacy issues. Bao Zonghe Editor-in-Chief: Theoretical Construction of Health and Safety Construction and practice. Taipei: Cross-Strait Exchange Vision Foundation 2009:263-298.
4. Bowsher G, Milner C, Sullivan R: Medical intelligence, security and global health: the foundations of a new health agenda. Journal of the Royal Society of Medicine 2016, 109(7):269-273.
5. Chiu YW, Weng YH, Su YY, Huang CY, Chang YC, Kuo KN: The nature of international health security. Asia Pacific journal of clinical nutrition 2009, 18(4):679-683.
6. Chiu YW, Chang YC, Wahlqvist ML, McKay J: The implications of climate change on food security in the Asia-Pacific Region. United Nations Standing Committee on Nutrition News 2010, 38:26-31.
7. Chiu YW, Huang CY, Chang YC: Challenges and perspectives of health security between Taiwan and Mainland China: a case study of infectious diseases. Prospect Quarterly 2011, 12(2):1-42.
8. Chiu HH, Hsieh JW, Wu YC, Chou JH, Chang FY, Building core capacities at the designated points of entry according to the International Health Regulations 2005: a review of the progress and prospects in Taiwan. Glob Health Action. 2014 Jul 17; 7:24516. doi: 10.3402/gha.v7.24516.
9. Cho HW, Chu C: Two Epidemics and Global Health Security Agenda. Osong public health and research perspectives 2015, 6(6):S1-2.
10. GHSA Preparation Task Force T: Summing up the Global Health Security Agenda 2015 High Level Meeting in Seoul. Osong public health and research perspectives 2015, 6(6):S6-S24.
11. Heymann DL, Chen L, Takemi K, Fidler DP, Tappero JW, Thomas MJ, Kenyon TA, Frieden TR, Yach D, Nishtar S et al: Global health security: the wider lessons from the west African Ebola virus disease epidemic. Lancet 2015 , 385(9980):1884-1901. Hollande F: Towards a global agenda on health security. Lancet 2016, 387(10034):2173-2174.
12. Kickbusch I, Kokeny M: Global health diplomacy: five years on. Bulletin of the World

- Health Organization 2013, 91(3):159-159A.
14. Morhard R, Katz R: Legal and regulatory capacity to support the global health security agenda. *Biosecurity and bioterrorism: biodefense strategy, practice, and science* 2014, 12(5):254-262
  15. Olu OO: The Ebola Virus Disease Outbreak in West Africa: A Wake-up Call to Revitalize Implementation of the International Health Regulations. *Frontiers in public health* 2016, 4:120.
  16. Oslo Ministerial Declaration--global health: a pressing foreign policy issue of our time. *Lancet* 2007, 369(9570):1373-1378.
  17. Paranjape SM, Franz DR: Implementing the global health security agenda: lessons from global health and security programs. *Health security* 2015, 13(1):9-19.
  18. Rebecca Bunnell, Sue Lin Yee, Effectively Measuring and Framing Progress: CDC GHS Monitoring & Evaluation, February 11, 2016. Available at CDC Website Standley CJ, Sorrell EM, Kornblat S, Fischer JE,
  19. Katz R: Implementation of the International Health Regulations (2005) Through Cooperative Bioengagement. *Frontiers in public health* 2015, 3:231.
  20. Su YY, Weng YH, Chiu YW: Climate change and food security in East Asia. *Asia Pacific journal of clinical nutrition* 2009, 18(4):674-678.
- twenty two Wolkicki SB, Nuzzo JB, Blazes DL, Pitts DL, Iskander JK, Tappero JW: Public Health Surveillance: At the Core of the Global Health Security Agenda. *Health security* 2016, 14(3):185-188.
- twenty two Wahlqvist ML, Keatinge JD, Butler CD, Friel S, McKay J, Easdown W, Kuo KN, Huang CJ, Pan WH, Yang RY et al: A Food in Health Security (FIHS) platform in the Asia Pacific Region: the way forward. *Asia Pacific journal of clinical nutrition* 2009, 18(4):688-702.
- twenty two Wahlqvist ML, McKay J, Chang YC, Chiu YW: Rethinking the food security debate in Asia: some missing ecological and health dimensions and solutions. *Food Security* 2012, 4(4):657-670.
- twenty two WHO, 2016a, Sixty-ninth World Health Assembly closes, <http://www.who.int/mediacentre/news/releases/2016/wha69-28-may-2016/en/>
25. WHO, 2016b, World Health Assembly highlights importance of multisectoral action on health <http://www.who.int/mediacentre/news/releases/2016/WHA69-importance-of-multisectoral-action/en/>

26. WHO, 2016c, Joint external evaluation tool: International Health Regulations (2005).  
<http://www.who.int/iris/handle/10665/204368>.
27. WHO, 2016d, Global Health Security Agenda: Action Packages.  
<http://www.cdc.gov/globalhealth/security/actionpackages/> . WHO, 2016e, IHR core capacities. <http://www.emro.who.int/international-health>
28. .
29. WHO, 2016f, International Health Regulations (2005)-IHR CORE CAPACITY MONITORING FRAMEWORK.  
[http://apps.who.int/iris/bitstream/10665/163737/1/WHO\\_HSE\\_GCR\\_2015.8\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/163737/1/WHO_HSE_GCR_2015.8_eng.pdf?ua=1&ua=1).
30. Government of Vietnam (2015). Vietnam GHSA 5-year Roadmap, Available at:  
<https://www.ghsagenda.org/docs/default-source/ghsa-roadmaps/ghsa-vietnamroadmap.pdf>
31. Department of Disease Control, Ministry of Health and Welfare ( 2016). IHR Joint External Evaluation of Taiwan. Available at:  
<http://www.cdc.gov.tw/uploads/files/201701/cbf247f3-64b0-4675-a5e8d4f70eaf24e5.pdf>
32. Government of Vietnam (nd). The Viet Nam One Health Strategic Plan for Zoonotic Diseases 2016-2020, Available at:  
[http://onehealth.org.vn/upload/upload/National%20One%20Health%20Strategic%20Plan%20for%20Zoonotic%20Diseases\\_EN.pdf](http://onehealth.org.vn/upload/upload/National%20One%20Health%20Strategic%20Plan%20for%20Zoonotic%20Diseases_EN.pdf)
33. US Department of Health and Human Services (2016). Self-Assessment Report for the Joint External Evaluation. Available at:  
<https://www.phe.gov/about/OPP/dihs/Documents/jee-self-assessment.pdf>
34. INDOHUN from <http://www.indohun.org/about-indohun/>
35. Kandun, IN, Samaan, G., Santoso, H., Kushadiwijaya, H., Juwita, R., Mohadir, A., & Aditama, T. (2010). Strengthening Indonesia's Field Epidemiology Training Programme to address International Health Regulations requirements . Bulletin of the World Health Organization, 88(3), 211-215.
36. Deckert, A., Agunos, A., Avery, B., Carson, C., Daignault, D., Finley, R., Irwin, R. (2015). CIPARS: AOne-Health Approach to Antimicrobial Resistance Surveillance. Online Journal of Public Health Informatics, 7(1), e68.
37. JVARM. (2016). Report on the Japanese Veterinary Antimicrobial Resistance Monitoring System 2012-2013. Available at:

[www.maff.go.jp/nval/english/pdf/jvrm\\_report\\_2012\\_2013.pdf](http://www.maff.go.jp/nval/english/pdf/jvrm_report_2012_2013.pdf)

38. SWAB. (2016). NethMap 2017: Consumption of antimicrobial agents and antimicrobial resistance among medically important bacteria in the Netherlands in 2016. Available at: <http://nl.sitestat.com/rivm/rivm->

[nl / s link.en.documents\\_and\\_publications.scientific.reports.2017.june.nethmap\\_2017\\_consumption\\_of\\_antimicrobial\\_agents\\_and\\_antimicrobial\\_resistance\\_among\\_medically\\_important\\_bacteria\\_in\\_the\\_netherlands\\_mar\\_2017\\_monitoring\\_of\\_antimicrobial\\_resistance\\_and\\_antibiotic\\_usage\\_in\\_animals\\_in\\_the\\_netherlands\\_in\\_2016 & ns\\_type = pdf & ns\\_ url = http://www.rivm.nl/dsresource/objectid=f9799644-beb0-405b-b35fc3db66dc153b & type = pdf & disposition =? inline](http://nl.sitestat.com/rivm/rivm-nl/s/link.en.documents_and_publications.scientific.reports.2017.june.nethmap_2017_consumption_of_antimicrobial_agents_and_antimicrobial_resistance_among_medically_important_bacteria_in_the_netherlands_mar_2017_monitoring_of_antimicrobial_resistance_and_antibiotic_usage_in_animals_in_the_netherlands_in_2016&ns_type=pdf&ns_url=http://www.rivm.nl/dsresource/objectid=f9799644-beb0-405b-b35fc3db66dc153b&type=pdf&disposition=?inline)

39. Department of Health (2013). UK Five Year Antimicrobial Resistance Strategy 2013 to 2018. Available

at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/244058/20130902\\_UK\\_5\\_year\\_AMR\\_strategy.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/244058/20130902_UK_5_year_AMR_strategy.pdf)

40. Morikane, K. (2012). Infection control in healthcare settings in Japan. Journal of epidemiology, 22(2), 86-90.

41. Public Health Agency of Canada (2016). Canadian Biosafety Handbook, Second Edition. Available at: <https://www.canada.ca/en/public-health/services/canadian-biosafetystandards-guidelines/handbook-second-edition.html>

42. Ministry of Health Singapore (nd). MOH-Approved Facility Certifier (MOH-AFC) Available at:

[https://www.moh.gov.sg/content/dam/moh\\_web/BioSafety/docs/List%20of%20AFCs.pdf](https://www.moh.gov.sg/content/dam/moh_web/BioSafety/docs/List%20of%20AFCs.pdf)

43. Ministry of Health Singapore (nd). List of MOH-Approved Training Provider (MOHATP). Available

at: [https://www.moh.gov.sg/content/dam/moh\\_web/BioSafety/docs/Revised\\_Oct\\_2008\\_List\\_of\\_MOH\\_ATP.pdf](https://www.moh.gov.sg/content/dam/moh_web/BioSafety/docs/Revised_Oct_2008_List_of_MOH_ATP.pdf)

44. Public Health Agency of Canada (nd). Office of Biosafety and Biocontainment Operations Annual Report 2014–2015. Available at:

<http://www.blackbirdpcd.com/Images/OBBO%20Annual%20Report%2020142015%20exerpt.pdf>

45. Department of Justice, Canada. Human pathogens and toxins act (SC 2009, c. 24). Available at: <http://lois-laws.justice.gc.ca/PDF/H-5.67/>

46. UK Human animal infections and risk surveillance group (HAIRS) (nd). Available at:  
<https://www.gov.uk/government/collections/human-animal-infections-and-risk-surveillance-group-hairs>  
.
47. Rabaa, MA, Tue, NT, Phuc, TM, Carrique-Mas, J., Saylor, K., Cotten, M., Baker, S. (2015). The Vietnam Initiative on Zoonotic Infections (VIZIONS): A Strategic Approach to Studying Emerging Zoonotic Infectious Diseases. *EcoHealth*, 12(4), 726-735.
48. WHO (2017). Joint external evaluation of IHR core capacities of Viet Nam: mission report: 28 October-4 November 2016. Available at:  
<http://apps.who.int/iris/bitstream/10665/255037/1/WHO-WHE-CPI-2017.21-eng.pdf>
49. UK Department of Health (2015). Global Health Security Agenda: pilot assessment of the UK. Available at:  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/456984/IndependentReport\\_GHS\\_acc.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/456984/IndependentReport_GHS_acc.pdf)
50. Singapore One Health Coordinating Committee (2017). National Strategic Action Plan on Antimicrobial Resistance. Available at:  
[https://www.moh.gov.sg/content/dam/moh\\_web/Publications/Information%20Papers/SG%20National%20Strategic%20Action%20Plan%20on%20AMR.pdf](https://www.moh.gov.sg/content/dam/moh_web/Publications/Information%20Papers/SG%20National%20Strategic%20Action%20Plan%20on%20AMR.pdf)
51. US Department of Health and Human Services (2013). National action plan to prevent health care-associated infections: Road map to elimination April 2013. Available at:  
<https://health.gov/hcq/pdfs/hai-action-plan-ltcf.pdf>
52. Public Health Agency of Canada (2015). Canadian Integrated Program for Antimicrobial Resistance Surveillance (CIPARS) 2013 Annual Report-Chapter 1. Design and Methods. Guelph: Government of Canada.
53. <http://www.boca.gov.tw/content.asp?Cultem=4780&BaseDSD=13&CtUnit=17&mp=1>  
; <https://www.cia.gov/library/publications/the-world-factbook/geos/bm.html>
54. <http://www.searo.who.int/myanmar/areas/malariainbordertownshipsofmyanmar/en/> <http://libir.tmu.edu.tw/bitstream/987654321/53713/2/201407-07.pdf> <http://www.wpro.who.int/laos/topics/hiv/en/> ;
55. <http://www.wpro.who.int/laos/topics/tuberculosis/en/>
56. LAO PDR COUNTRY PROGRESS REPORT Global AIDS Response Progress Country Report, 2016
57. <http://www.wpro.who.int/laos/topics/tuberculosis/en/>
58. <https://www.mofa.gov.tw/CountryInfo.aspx?CASN=0984A85A3A9A6677&n=4043244986E87475&sms=26470E539B6FA395&s=BF634E946ACD5EAA>

59. <https://zh.wikipedia.org/wiki/%E8%8F%B2%E5%BE%8B%E5%AE%BE>
60. <http://www.boca.gov.tw/content.asp?Cultem=57&BaseDSD=13&CtUnit=14&mp=1>
61. [http://www.wpro.who.int/asia\\_pacific\\_observatory/Philippines\\_Health\\_System\\_Review.pdf](http://www.wpro.who.int/asia_pacific_observatory/Philippines_Health_System_Review.pdf)
62. [https://en.wikipedia.org/wiki/Health\\_in\\_the\\_Philippines](https://en.wikipedia.org/wiki/Health_in_the_Philippines)
63. <http://www.doh.gov.ph/sites/default/files/basic-page/chapter-one.pdf>
64. [https://www.philhealth.gov.ph/about\\_us/org\\_structure.pdf](https://www.philhealth.gov.ph/about_us/org_structure.pdf)
65. <http://portal.doh.gov.ph/index.html>
66. [http://nspp.mofa.gov.tw/nspp/country\\_info.php?country=7917](http://nspp.mofa.gov.tw/nspp/country_info.php?country=7917)
67. The Foreign Trade Development Association of the Republic of China: 2017 New Southbound Market Expansion Strategy Briefing
68. <https://zh.wikipedia.org/wiki/%E8%B6%8A%E5%8D%97>
69. <http://www.cdc.gov.tw/InternationalTravel/CountryInfo.aspx?treeid=aa2d4b06c27690e6&nowtreeid=fb6a405b1d67aa69&tid=CFC85D724E9CA71F#1>
70. <http://www.boca.gov.tw/content.asp?Cultem=34&BaseDSD=13&CtUnit=14&mp=1>
71. <http://www.expat.or.id/medical/tuberculosis.html>
72. [http://nspp.mofa.gov.tw/nspp/country\\_info.php?country=7917](http://nspp.mofa.gov.tw/nspp/country_info.php?country=7917)